

## **PURCHASE ORDER**

Supplier's Order

Order Number: IMPO026034

Order Date: 07-MAY-20 Supplier Code: VI0003

Reference: IMPO026034

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Order to: VIAMED LIMITED 15 STATION ROAD **CROSS HILLS** KEIGHLEY WEST YORKSHIRE BD20 7DT

Deliver to:

## STORES DEPARTMENT

NORTHAMPTON GENERAL HOSPITAL NHS TRUST CLIFTONVILLE NORTHAMPTON, NN1 5BD

Email: supplies.dept@ngh.nhs.uk

All invoices to:

## **PAYMENTS DEPARTMENT**

NORTHAMPTON GENERAL HOSPITAL NHS TRUST

**CLIFTONVILLE NORTHAMPTON** 

NN1 5BD

Email: nghpayments@ngh.nhs.uk

BD20 7D1	Email: supplies.depte rightmis.dk		Lillali. Ilg	Email: hghpayments@ngh.hins.uk		
Product or Service	ОТУ	UOM	Date Required	Contract Price	Net Value	
1114005 EYEMAX 2 NEONATAL PHOTOTHERAPY MASK MODEL R300P01 BLUE SIZE REGULAR	1.C	PACK 20	07-MAY-20	42.50	42.5	
1114006 EYEMAX 2 NEONATAL PHOTOTHERAPY MASK MODEL R300P02. ORANGE SIZE PREMIE Product: 1114006 Contract: .	1.0	00 PACK 20	07-MAY-20	40.75	40.7	
Terms and Conditions			L	TOTAL	83.25	

## Terms and Conditions

Unless specified as an order placed under an existing contract, the order is subject to the NHS conditions of Contract for the Purchase of Goods and the Contract for the supply of Services (copies of which may be obtained on application) and the terms and conditions set out therein.

Any queries please contact Supplies on 01604 545115 For and on behalf of Northampton General Hospital NHS Trust