BUCKINGHAMSH	IRE HEALTHCARE NE	IS TRUST	PURCHESE CRUE	R Order Nur	nber <b>E283937</b> 1	oage: 1	l of 1	
Supplier			Delivery Point	1	Oate 02-FEB-21			
VIAMED 15 STATION ROAD CROSS HILLS KEIGHLEY W.YORKSHIRE BD20 7DT			SMH-SPECIAL CARE BABY UNIT GENERAL STORES - SMH ENTRANCE 2 STOKE MANDEVILLE HOSPITAL AYLESBURY BUCKS HP21 8AL	BUCKINGHAMSHII ACCOUNTS PAYAB				
Vendor No. 104645 BHT Requisition No.: R33			R333541 BHT IDA Code/Description:	7D7468 SM	7D7468 SMH-SPECIAL CARE BABY UNIT			
Quantity	Unit of Purchase	Product Code	Order Specification	Unit Price excluding VA	Value Excluding VAT	VAT	Delivery Required by	
2.00	BOX 20	1114005	EyeMax 2 Neonatal Phototherapy Mask - Regular	42.5	0 85.00	01	08/02/21	
2.00	BOX 20	1114006	EyeMax 2 Neonatal Phototherapy Mask - Preemie	40.7	5 81.50	01	08/02/21	
ONDITIONS OF SUPPLY					ie 166.50			
. This Order is subject to the Conditions of Contract applicable to the Contract/Quotation referred to above. In the absence of such reference the N.H.S. Conditions of Contract for the Purchase of Goods will apply (***)  (*** Copy available on request ***)					AT 33.30 ue 199.80			
<ul> <li>A Delivery Note must accompany each delivery of the goods.</li> <li>This order (E283937) must be quoted on all delivery notes, invoices and correspondence.</li> <li>Each invoice must refer to one order number only.</li> <li>Failure to address correctly as stated on this order will result in a delay in payment.</li> </ul>					All Order Price & Delivery charge queries: email: eproc.enquiries@buckshealthcare.nhs.uk			
. Failure to address correctly as stated on this order will result in a delay in payment Delivery between 0830 and 1600 Monday to Thursday 0830 and 1500 Friday (unless otherwise stated)					All Product / Service queries contact: email: david.house@nhs.net			

Invoice enquiries only: email: apfinance@buckshealthcare.nhs.uk