

## **PURCHASE ORDER**

Supplier's Order

Order Number: IMPO035766

Order Date: 18-MAR-21 Supplier Code: VI0003

Reference: IMPO035766

Page: 1

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	Email: supplies.dept@right.fins.dk				Email: ngnpayments@ngn.nns.uk			
Product or Service		QTY	UOM	Date Required	Contract Ref	Price	Net Value		
1114005 EYEMAX 2 NEONATAL PHOTOTHERAPY MASK MODEL R300P01 BLUE SIZE REGULAR		1.00	PACK 20	18-MAR-21		42.50	42.50		
0021013 SENSOR WRAP FOR USE WITH MULTI-SITE 'Y' SENSORS REF 6554 **ORDER 11 + BOXES FOR PRICE BREAK** Product: 0021013 Contract: .		14.00	BOX 12	18-MAR-21		9.40	131.60		
Terms and Conditions						TOTAL	174.10		

## 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