

## **PURCHASE ORDER**

Supplier's Order

Order Number: OG12210 Order Date: 01-JUN-21

Supplier Code: VI0003 Reference: GC4

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

5520 751			Email: rigripayments@rigrimis.tak			
Product or Service	QTY	UOM	Date Required	Contract Ref	Price	Net Value
1114005 EYEMAX 2 NEONATAL PHOTOTHERAPY MASK MODEL R300P01 BLUE SIZE REGULAR	2.00	PACK 20	31-MAY-21	NCVI0003-1	42.50	85.00
1114006 EYEMAX 2 NEONATAL PHOTOTHERAPY MASK MODEL R300P02. ORANGE SIZE PREMIE	1.00	PACK 20	31-MAY-21	NCVI0003-1	40.75	40.75
VIAMED CARRIAGE MINIMUM CHARGE	1.00	1	31-MAY-21	NCVI0003-1	10.00	10.00
Georgia Crow Assistant Buyer Purchasing & Supplies Tel 01604 545115 e-mail georgia.crow@ngh.nhs.uk						
Terms and Conditions				I	TOTAL	135.75

## 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