

PURCHASE ORDER

Supplier's Order

Order Number: IMPO038374

Order Date: 03-JUN-21 Supplier Code: VI0003

Reference: IMPO038374

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TOTAL

172.35

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.dept@ng	n.nns.uk	Email: nghpayments@ngh.nhs.uk		
Product or Service	ату	UOM	Date Contr Required Re	act Price	Net Value
1114006 EYEMAX 2 NEONATAL PHOTOTHERAPY MASK	1.00	PACK 20	03-JUN-21	40.75	40.75
MODEL R300P02. ORANGE SIZE PREMIE					
0021013 SENSOR WRAP FOR USE WITH MULTI-SITE	14.00	BOX 12	03-JUN-21	9.40	131.60
'Y' SENSORS REF 6554					
ORDER 11 + BOXES FOR PRICE BREAK Product: 0021013 Contract: .					
Product: 0021013 Contract: .					
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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