

## Purchase Order

VIAMED LTD 15 STATION ROAD CROSS HILL KEIGHLEY

WEST YORKSHIRE

BD20 7DT

Your Reference: Payment Terms:

**Order Number:** 

Supplier Id:

**Order Date:** 

**Delivery Date:** 

Standard 30 Days

1437074

658929

11/06/2021

11/06/2021

**Delivery To:** 

Supplies & Distribution Department Royal United Hospitals Bath NHS FT Combe Park Bath

Buyer: Luke Oddy [luke.oddy@nhs.net]

BA1 3NG

Invoice To:

Accounts Payable Building E8 Combe Park Bath BA1 3NG

Invoice Email: ru

ruh-tr.accountspayable@nhs.net

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Article	Description	Qty	Unit	Unit Price	Amount in GBP
1FXU124	EYEMAX2 PHOTOTHERAPY EYE MASK REGULAR 32-38CM REF;1114005	1	BOX OF 20	42.50	42.50

For Terms and Conditions see:

1) NHS Terms & Conditions

2) Royal United Hospital Tender & Quotation Documentation

Total in GBP

51.00