Healthcare Partners Ltd

OFFICIAL ORDER

Order Date : 10-08-2021

Order No : **333113293**

Must be quoted on all correspondence.

Deliver To :

RECEIPT AND DISTRIBUTION
RECEIPT AND DISTRIBUTION
ROYAL SURREY COUNTY HOSPITAL
EGERTON ROAD
GUILDFORD
GU2 7XX
GB
Requested delivery date: 11-08-2021
Location ID: MA2185V SHERE WARD (V) (IMS)

Invoice and Payment Enquiries To

HEALTHCARE PARTNERS LIMITED
HEALTHCARE PARTNERS LIMITED
MA2 PAYABLES F755
PHOENIX HOUSE, TOPCLIFFE LANE
WAKEFIELD
WF3 1WE
GB
Tel: 0303 123 1177

All enquiries regarding this order to:

Contact : MA2 MITCHELL, VIOLET
Telephone :
Facsimile No. :
Email Address : violet.mitchell@nhs.net

Supplier

Viamed Ltd

Customer's Supplier Name:
VIAMED LTD

Conditions

THIS ORDER IS SUBJECT TO STANDARD NHS TERMS AND CONDITIONS. IF PRICES STATED ON THIS ORDER ARE INCORRECT ANY REVISED PRICES MUST BE AUTHORISED BY THE BUYER PRIOR TO ORDER EXECUTION. PAYMENT WILL BE MADE AT THE PRICES STATED HEREIN. DO NOT ASSIGN THIS ORDER SPECIAL INSTRUCTIONS.

Line		Goods or Services Required	Quantity	UOM	Contract Ref.	Unit Price	Line Value	VAT
1		1114005 **EYEMAX 2 NEONATAL PHOTOTHERAPY MASK REG**	**2**	PACK 20	333000069	£42.50	£85.00	-

Net Total :	**£85.00**
Carriage :	**-**
Tax :	**-**
Total :	**£85.00**