



OFFICIAL ORDER FORM

Ferry-Oordrail Oikoil

Supplier:

Name:.....VIAMED.....
Address:.....QUOTE QVM.137037.....
.....
Post Code:..... E-mail:.....

Delivery Address:

Name:.....
Address:.....
.....
.....
.....
.....
.....
E-mail:.....

Invoice Address:

Name: Department of Infrastructure
Address: Public Estates and Housing Division
Hills Meadow
Peel Road
Douglas Post Code:
IM1 5EB
E-mail:

Please supply the under mentioned goods or services:

QTY	Unit Price	Total Price	Item Code	Cost Centre
5	64.80	324	00MIII	02-09-N067-001
Carriage Discount		43.94		
Order TOTAL (excl. VAT)		£ 367 p 94		

To secure prompt payment these instructions should be carefully followed:

- (i) Quote the above Order Form number on your Invoice
- (ii) Send a separate invoice for each order addressed as shown in the right - hand panel immediately the order has been completed. A separate monthly statement is not required.
- (iii) Payment may be refused if goods or services are supplied without an official order or are not in accordance with the order.
- (iv) Retain this order until the invoice has been paid.
- (v) The purchase is subject to Standard Terms and Conditions for the Purchase of Goods/Services

Date: 13/5/22

FO MY LAUE Signature: _____

Print Name: M. H. ...

STAYD OKOIL/Grade: ERME