Supplier				Deliver to/Execute work at									
VIAMED LTD 15 STATION ROAD CROSS HILLS KEIGHLEY WEST YORKSHIRE				GOSH TRUST STORES GREAT ORMOND STREET HOSPITAL FOR CHILDREN NHS FOUNDATION TRUST 50A GUILFORD STREET LONDON WC1N 1DE	Great Ormond Street NHS Hospital for Children NHS Foundation Trust								
BD20 7DT				Invoice and Payment Enquiries	Order Number WW172787 Order Date 11-AUG-22								
Email: eproc@gosh.nhs.uk Telephone Number: 0207 405 9200 ext. 7978 . If any details are incorrect, you must advise the Procurement Department immediately				ACCOUNTS PAYABLE DEPARTMENT GREAT ORMOND STREET HOSPITAL NHS FOUNDATION TRUST GREAT ORMOND STREET LONDON WC1N 3JH Telephone No: 020-7762-6287 /6292/6288/6291 Fax Number: 020-7829-8681									
							VAT Registration Number: GB654-9229-10 Email: payments@gosh.nhs.uk						
							ontract Reference	Item Code	Quantity Required	Unit of Measure	Item Description REPRINT	Unit Price (£) Excl. VAT	Value (£) Excl. VAT
											1.00 1x20 1114006 1114006 - EyeMax 2 Neonatal Phototherapy Mask Premie	46.00 46.00	
				 The goods The order Goods will Any altera 			s must be accompanied number (MM72787 <u>) m</u> Il be received only betw ations in quantity or price	l by a delivery not nust be quoted on reen 08:00 and 1 ce must be confir	te. all docume 6:00 Monda med in writi	t, this order is subject to the Trust's Standard Terms on application). Intation and on the outside of all cartons and packages. By to Friday. In the ordering officer. In the ordering officer. In the ordering officer. In the ordering officer.	Total Order Value (£)	46.0	