

ENQUIRIES

About this Order: MATMAN INTERFACE
eMail: UHLSupplies@uhl-tr.nhs.uk

General Queries: UHLSupplies@uhl-tr.nhs.uk

UHL Internal Ref: 778048

DELIVER TO

WARD 14 LV4 BALMORAL LRI
C/O MATERIALS HANDLING UNIT
LEICESTER ROYAL INFIRMARY
GATE 9
HAVELOCK STREET
LEICESTER
LE2 7HA

University Hospitals of Leicester
NHS Trust

**SUPPLIER**

VIAMED LIMITED
15 STATION ROAD
CROSS HILLS
KEIGHLEY
WEST YORKSHIRE
BD20 7DT
order@viamed.co.uk

Tel: 01535 634542

INVOICE ADDRESS

Accounts Payable Department
PO BOX 189
Leicester Royal Infirmary
LE1 5WP
Email: AccountsPayable@uhl-tr.nhs.uk
NHS Code: RWE.

DETAILS**PURCHASE ORDER MM131407**

ORDER DATE: 24/10/22
UHL CUST A/C NO: **Please advise**
SUPPLIER No: 100437
DELIVER BY: **25/10/22**
DELIVERY POINT: L62019

UHL CODE	CONTRACT	SUPPLIER CODE	DESCRIPTION	QUANTITY	UNIT	ITEM PRICE	NETT VALUE
1VML00013	C97423	1114006	1114006 EYEMAX PHOTOTHERAPY MASK - PREEMIE OC HEAD CIRCUMFERENCE 26-32 CM (10.4" - 12.6") PACK 20	1.00	PACK	46.00	46.00
CONDITIONS OF SUPPLY - All invoices must quote Official Order No. and be rendered as directed. - All goods must be accompanied by a Delivery Note quoting Purchase Order No. - This order is subject to the appropriate NHS Terms and Conditions of Contract prevailing at the time of order.						Net VAT Gross Total	46.00 9.20 55.20