ENQUIRIES

About this Order: Verity Pearson

eMail: verity.pearson@uhl-tr.nhs.uk

Tel: 01535 634542

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

UHL Internal Ref: R463959

SUPPLIER

VIAMED LIMITED 15 STATION ROAD **CROSS HILLS** KEIGHLEY

WEST YORKSHIRE

BD20 7DT

order@viamed.co.uk

DELIVER TO

MATERIALS HANDLING UNIT (LRI) LEICESTER ROYAL INFIRMARY

GATE 9

HAVELOCK STREET

LEICESTER LE2 7HA

INVOICE ADDRESS

Accounts Payable Department

PO BOX 189

Leicester Royal Infirmary

LE1 5WP

Email: AccountsPayable@uhl-tr.nhs.uk

NHS Code: RWE.

University Hospitals of Leicester NHS Trust

DETAILS

PURCHASE ORDER LR714422

ORDER DATE: 06/03/23 UHL CUST A/C NO: Please advise

SUPPLIER No: 100437 DELIVER BY: 07/03/23 **DELIVERY POINT: L600D2**

UHL CODE	CONTRACT	SUPPLIER CODE	DESCRIPTION	QUANTITY	UNIT	ITEM PRICE	NETT VALUE
1VML00015	C97423	0021013	0021013 POSEY PULSE OXIMETRY SENSOR WRAP 6554 3CM BOX OF 12	6.00	вох	10.70	64.20
CONDITIONS OF SUPPLY 1. All invoices must quote Official Order No. and be rendered as directed. 2. All goods must be accompanied by a Delivery Note quoting Purchase Order No.					1	Net	64.2

- All goods must be accompanied by a Delivery Note quoting Purchase Order No.
- 3. This order is subject to the appropriate NHS Terms and Conditions of Contract prevailing at the time of order.

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VAT 12.84 Gross Total 77.04