

ENQUIRIES

About this Order: Barbara Smith
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General Queries: procurement@uhl-tr.nhs.uk

UHL Internal Ref: R528749

DELIVER TO

MATERIALS HANDLING UNIT (LRI)
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
orders@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 LR745676**

ORDER DATE: 18/06/25

UHL CUST A/C NO: **Please advise**

SUPPLIER No: 100437

DELIVER BY: **19/06/25**

DELIVERY POINT: L62365

UHL CODE	CONTRACT	SUPPLIER CODE	DESCRIPTION	QUANTITY	UNIT	ITEM PRICE	NETT VALUE
1VML00000 A	C331692	PPUPS1	PPUPS1 CARRIAGE CHARGE PER ORDER	1.00	EACH	12.00	12.00
1VML00012	C331692	1114005	1114005 EYEMAX PHOTOTHERAPY MASK - REGULAR HEAD CIRCUMFERENCE 32-38 CM (12.6" - 14.9") PACK 20	3.00	PACK	56.70	170.10
1VML00013	C331692	1114006	1114006 EYEMAX PHOTOTHERAPY MASK - PREMIE OC HEAD CIRCUMFERENCE 26-32 CM (10.4" - 12.6") PACK 20	1.00	PACK	56.70	56.70
1VML00015	C331692	0021013	0021013 POSEY PULSE OXIMETRY SENSOR WRAP 6554 3CM BOX OF 12	1.00	BOX	16.20	16.20

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.
3. This order is subject to the appropriate NHS Terms and Conditions of Contract prevailing at the time of order.

Net	255.00
VAT	51.00
Gross Total	306.00