ENQUIRIES

About this Order: Emma Evans

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

UHL Internal Ref: R537165

SUPPLIER

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

WEST YORKSHIRE

BD20 7DT orders@viamed.co.uk Tel: 01535 634542

DELIVER TO

LOUGHBOROUGH RENAL UNIT PHASE ONE LOADING BAY LOUGHBOROUGH HOSPITAL HOSPITAL WAY (OFF EPINAL WAY)

LOUGHBOROUGH LEICESTERSHIRE LE11 5JY

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 GG619674

ORDER DATE: 21/10/25 UHL CUST A/C NO: Please advise

SUPPLIER No: 100437 DELIVER BY: 21/10/25 **DELIVERY POINT: L60353**

UHL CODE	CONTRACT	SUPPLIER CODE	DESCRIPTION	QUANTITY	UNIT	ITEM PRICE	NETT VALUE
			2810011 MD300-C2 OLED Finger Pulse Oximeter	18.00	EACH	23.10	415.80
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.					Net	415.80	
 This order is subject to the appropriate NHS Terms and Conditions of Contract prevailing at the time of order. Page No: 1 of 1						VAT Gross Total	83.16 498.9 6