

ENQUIRIES

About this Order: Barbara Smith
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General Queries: uhl-tr.procurementmailbox@nhs.net

UHL Internal Ref: R549514

DELIVER TO

MATERIALS HANDLING UNIT (LRI)
 LEICESTER ROYAL INFIRMARY
 GATE 9
 HAVELOCK STREET
 LEICESTER
 LE2 7HA

University Hospitals of Leicester



NHS Trust

DETAILS**PURCHASE ORDER LR755069**

ORDER DATE: 19/04/26

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

SUPPLIER No: 100437

DELIVER BY: **20/04/26**

DELIVERY POINT: L62365

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: uhl@invoices.oneadvanced.com
 NHS Code: RWE.

UHL CODE	CONTRACT	SUPPLIER CODE	DESCRIPTION	QUANTITY	UNIT	ITEM PRICE	NETT VALUE
1VML00000 A		PPUPS1	PPUPS1 CARRIAGE CHARGE PER ORDER	1.00	EACH	12.00	12.00
1VML00012	C331692	1114005	1114005 EYEMAX PHOTOTHERAPY MASK - REGULAR REFERENCE 32-38 CM (12.6" - 14.9") PACK 20	3.00	PACK	56.70	170.10

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	182.10
VAT	36.42
Gross Total	218.52