ENQUIRIES

About this Order: Verity Pearson

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

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

UHL Internal Ref: R414351

SUPPLIER

VIAMED LIMITED 15 STATION ROAD CROSS HILLS KEIGHLEY

WEST YORKSHIRE

BD20 7DT order@viamed.co.uk

Tel: 01535 634542

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 LR689253

ORDER DATE: 13/05/21 UHL CUST A/C NO: Please advise

SUPPLIER No: 100437 DELIVER BY: 14/05/21 DELIVERY POINT: L600D2

| UHL CODE | CONTRACT | SUPPLIER CODE | DESCRIPTION | QUANTITY | UNIT | ITEM PRICE | NETT VALUE |
|--|----------|---------------|--|----------|------|------------|------------|
| 1VML00015 | | 0021013 | 0021013 POSEY PULSE OXIMETRY SENSOR WRAP 6554 3CM BOX OF 12 | 4.00 | | 9.65 | 38.6 |
| | | | | | | | |
| | | | | | | | |
| 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 | 38.6 | |

- 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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| Net | 38.60 | VAT | 7.72 | Gross Total | 46.32