ENQUIRIES

VIAMED LIMITED

CROSS HILLS KEIGHLEY

BD20 7DT

15 STATION ROAD

WEST YORKSHIRE

order@viamed.co.uk

About this Order: Richard Scott

eMail: richard.scott@uhl-tr.nhs.uk

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

UHL Internal Ref: R447593

SUPPLIER INVOICE ADDRESS

Tel: 01535 634542

Accounts Payable Department

PO BOX 189

DELIVER TO

GROBY ROAD LEICESTER

LE3 9QP

Leicester Royal Infirmary

RECEIPTS & DISTRIBUTION

GLENFIELD HOSPITAL

LE1 5WP

Email: AccountsPayable@uhl-tr.nhs.uk

NHS Code: RWE.

University Hospitals of Leicester

NHS Trust

DETAILS

PURCHASE ORDER GG603670

ORDER DATE: 08/08/22 UHL CUST A/C NO: Please advise

SUPPLIER No: 100437
DELIVER BY: 01/08/22
DELIVERY POINT: L67253

JHL CODE	CONTRACT	SUPPLIER CODE	DESCRIPTION	QUANTITY	UNIT	ITEM PRICE	NETT VALU
			121197 `V` mount pole clamp, horizontal	6.00	EACH	62.00	372.0
			carriage	1.00	EACH	10.00	10.
			AS PER AKIM				
CONDI	TIONS OF S		voices must quote Official Order No. and be rendered as directed. ods must be accompanied by a Delivery Note quoting Purchase Order No	•	•	Net	382

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

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Net	382.00
VAT	76.40
Gross Total	458.40