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Viamed Ltd

**Delivery Address**

Raigmore Hospital
Electromedical Equipment Services
TP 2255 Medical Physics
Old Perth Road
Inverness
IV2 3UJ

Invoice Address

NHS Highland
Finance Department
Assynt House
Beechwood Park
Inverness
IV2 3BW

Contact Name : Colin Mason
Contact Tel : 01463704276

Account : 00002310
Customer Reference : HA13843557
Date : 09 Feb 2024
Priority : 3
Due Date : 09 Feb 2024
Priced In : UK Pounds

Order Confirmation CVM148186

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CIP Carriage and Insurance Paid To Raigmore Hospital, UK * Incoterms(R) 2020

Your Viamed Contact for this Order Confirmation : aqib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0330415	MaxVenturi Leak Test Kit Ref. R211P32	1	15.00	3.00	18.00
PPUPS1	UPS Courier Delivery - Standard	1	8.00	1.60	9.60

Total Net: 23.00
Total Vat: 4.60
Total: 27.60

Banking details
Bank BIC
Sort Code Barclays Bank PLC
Account Number 20-78-42
IBAN 00906662
BIC GB05BUKB20784200906662
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