Invoice Address Manchester University NHSFT Accounts Payable - Central Invoices Finance and Procurement Business Unit Trafford General Hospital Davyhulme M41 5SL

Delivery Address North Manchester General Hospital **EBME** Department Delaunavs Road Crumpsall

Manchester M8 5RB

Supplier Viamed Ltd 15 Station Road Cross Hills

Cross Hills Keighley, West Yorkshire BD20 7DT, United Kingdom Tel: +44 (0) 1535 634542 Fax: +44 (0) 1535 635582 Email: info@viamed.co.uk VAT Reg No: GB287389593

Company Reg No: 01291765 Eori No: GB287389593000

Tracking Number

Contact Name Linda Eadie Contact Tel 01617202347 00003580 Account **Customer Reference** 000408918 Date 02 Nov 2023

Priced In **UK Pounds**

Invoice RVM146397-1

CIP Carriage and Insurance Paid To North Manchester Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM146397-1 Contact kate.griffiths@viamed.co.uk

Item Reference Description Quantity Unit Unit Vat Total Envitec MySign O Oxygen Monitor Kit 1 394.85 78.97 473.82 0111277 Tariff 90181990-00 Including standard accessories: CoO Germany OOM111 oxygen sensor USB cable T-adapter Flow diverter plus 0121352 mains power supply and adapters (UK/EU/USA) S/N:103731 **UPS Courier Delivery - Standard** PPUPS1 12.00 2.40 14.40 AWB:1Z9W96386876094313

> Total Net: 406.85 Total Vat: 81.37 Total: 488.22

1Z9W96386876094313

Banking details Bank

Barclays Bank PLC Sort Code 20-78-42 Account Number 00906662

IBAN GB05BUKB20784200906662 BUKBGB22

Terms & conditions https://www.viamed.co.uk/terms

Terms: Net 30 days from date of invoice.

Full invoice amount to be credited to our account net of all bank charges. Claims: Please claim non delivery within 7 days of invoice.

Shortages or damage within 3 days of receipt.

Claims after these times cannot be entertained.

Title to goods does not pass until payment in full has been received.

Page 1