**Invoice Address** The Newcastle upon Tyne Hospitals NHS FT Accounts Payable Level 2 Regent Point Regent Farm Road Newcastle Upon Tyne NE3 3HD

Delivery Address Dental Hospital 1 910D15 Dental Theatres 28 and 29 Day Unit Richardson Road Newcastle Upon Tyne NE2 4AZ

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

Contact Name Supplies 01912336161 Contact Tel 00003806 Account Customer Reference RTDN400335331 Date 20 Nov 2023

Tracking Number 1Z9W96386842519981

Priced In **UK Pounds** 

## Invoice RVM146764-1

CIP Carriage and Insurance Paid To Dental Hospital, UK \* Incoterms(r) 2020

## Delivery Reference DVM146764-1 Contact agib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110023 Tariff 9019209000 CoO Germany	Viamed Oxygen Sensor R-23V	2	40.00	8.00	96.00
	S/N:V123855-V123856				
PPUPS1	UPS Courier Delivery - Standard		0.00	0.00	0.00
	AWB:1Z9W96386842519981				

**Total Net:** 80.00 Total Vat: 16.00 Total: 96.00

Banking details Bank

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

BUKBGB22

GB05BUKB20784200906662 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