Invoice Address West Suffolk NHST Finance Department Accounts Payable Hardwick Lane **Bury St Edmunds IP33 2QZ**

Delivery Address West Suffolk NHS Foundation Trust Main Stores Hardwick Lane Bury St Edmunds IP33 2QZ

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 Company Reg No: 01291765 Eori No: GB287389593000

Kerry Clover Contact Name 01284712829 Contact Tel 00000835 Account 007003560 Customer Reference Date 21 Nov 2023

Tracking Number 1Z9W96386841650189

Priced In **UK Pounds**

Invoice RVM146773-1

CIP Carriage and Insurance Paid To West Suffolk NHSFT, UK * Incoterms(r) 2020

Delivery Reference DVM146773-1 Contact agib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
4420869 Tariff 9018199000 CoO Germany	VersaStream Luer Lock Male CO2/O2 Sampling Line - Oral/Nasal Adult, Long-term, Box of 10	1	100.00	20.00	120.00
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841650189		12.00	2.40	14.40

Total Net: 112.00 Total Vat: 22.40 Total: 134.40

Banking details

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

IBAN GB05BUKB20784200906662 BIC 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.

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