

Invoice Address
University Hospitals Dorset NHSFT (H)
ELFS Shared Services
PO Box 4418, Unit 2
Swindon
SN4 4RW

Supplier
Viamed Ltd
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Contact Name Charlotte Wilson
Contact Tel 01202665511
Account 00004200
Customer Reference UHD1267
Date 01 Dec 2023
Tracking Number 1Z9W96386842437471
Priced In UK Pounds

Invoice RVM146979-1

Delivery Address
Poole Hospital
Goods Inwards
Longfleet Road
Poole
BH15 2JB

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

Delivery Reference DVM146979-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0021013 Tariff 90181990-00 CoO United States	Posey Sensor Wraps Model 6554 Box of 12	12	11.45	2.29	164.88
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842437471		0.00	0.00	0.00

Total Net: 137.40
Total Vat: 27.48
Total: 164.88

Banking details
Bank Barclays Bank PLC
Sort Code 20-78-42
Account Number 00906662
IBAN GB05BUKB20784200906662
BIC BUKGBB22
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.