**Invoice Address** University Hospitals Sussex NHSFT Creditors Payments, Level A4 **Brighton General Hospital** Elm Grove

**Brighton** BN2 3EW

**Delivery Address** St Richards Hospital Main Stores Spitalfield Lane Chichester PO19 6SE

Supplier Viamed Ltd 15 Station Road Cross Hills

Cross Hills
Keighley, West Yorkshire
BD20 7DT, United Kingdom
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Fax: +44 (0) 1535 635582
Email: info@viamed.co.uk
VAT Reg No: GB287389593
Company Reg No: 01291765
EORI No: GB287389593000

Steven Plain Contact Name Contact Tel 01243788122 00001195 Account Customer Reference 3169541 Date 15 Jan 2024

Tracking Number 1Z9W96386840724164

Priced In **UK Pounds** 

## Invoice RVM147641-1

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

## Delivery Reference DVM147641-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1480000 Tariff 9018199000 CoO United Kingdom	V1000 Foetal Heart Simulator Service and Functional Check	1	60.00	12.00	72.00
1430309 Tariff 9031808000 CoO United Kingdom PPUPS1	S/N: PR0773A30, SRS68654, SRN36210 V1000 Transducer Interface Cushion. SRS68654, SRN36210	1	0.00	0.00	0.00
	UPS Courier Delivery - Standard AWB:1Z9W96386840724164		12.00	2.40	14.40

**Total Net:** 72.00 Total Vat: 14.40 Total: 86.40

Banking details Bank

Barclays Bank PLC 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.

