**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

Contact Name

**Procurement Department** 

Contact Tel 01284712826 00000835 Account 007006574 Customer Reference Date 12 Jan 2024

Tracking Number 1Z9W96386841940026

Priced In **UK Pounds** 

## Invoice RVM147651-1

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

## Delivery Reference DVM147651-1 Contact emily.morton@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	3	11.80	2.36	42.48
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841940026		0.00	0.00	0.00

**Total Net:** 35.40 Total Vat: 7.08

Total: 42.48

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.

