

Invoice Address
SWBH BU, Sandwell and West
Birmingham Hospitals NHST
GF Office 5, Trinity House
Lyndon
West Bromwich
B71 4HJ

Delivery Address
City Hospital
Receipts and Distribution
Dudley Road
Birmingham
B18 7QH

Supplier
Viamed Ltd
15 Station Road
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	Patricia Higgins
Contact Tel	01215531831
Account	00000480
Customer Reference	SWBH140807
Date	05 Feb 2024
Tracking Number	1Z9W96386876554914
Priced In	UK Pounds

Invoice RVM147995-1

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

Delivery Reference DVM147995-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0021014 Tariff 90181990-00 CoO United States	Posey Sensor Wraps Model 6554 case of 48 boxes	1	496.50	99.30	595.80
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876554914		0.00	0.00	0.00

Total Net:	496.50
Total Vat:	99.30
Total:	595.80

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.