Invoice Address NHS Greater Glasgow and Clyde Payments Dept. PO Box 7388 Glasgow G51 9BS

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
EORI No: GB287389593000

Supplier

Contact Name Contact Tel Account Customer Reference Date

Rory Hunter 01412114283 00001870 GMPR13866234 16 Feb 2024

Tracking Number 1Z9W96386842971321

Priced In **UK Pounds**

Delivery Address Victoria Hospital FAO: Rory Hunter Clinical Physics First Floor G42 9LF

Invoice RVM148297-1

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

Delivery Reference DVM148297-1 Contact agib.majeed@viamed.co.uk

| Item Reference | Description | Quantity | Unit | Unit Vat | Total |
|---|---------------------------------|----------|-------|----------|--------|
| 0110047 Tariff 9019209000 CoO Germany | Viamed Oxygen Sensor R-47V | 2 | 71.25 | 14.25 | 171.00 |
| | S/N:V106997-V106998 | | | | |
| 0110439 Tariff 9019209000 CoO Germany | Maxtec Oxygen Sensor MAX-48 | 1 | 88.40 | 17.68 | 106.08 |
| | S/N:JH93201013 | | | | |
| PPUPS1 | UPS Courier Delivery - Standard | | 0.00 | 0.00 | 0.00 |
| | AWB:1Z9W96386842971321 | | | | |

Total Net: 230.90 Total Vat: 46.18

Total: 277.08

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.