

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

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 Isabell Wilson
Contact Tel 01414522530
Account 00001810
Customer Reference GBNS13894780
Date 08 Mar 2024
Tracking Number 1Z9W96386841612667
Priced In UK Pounds

Invoice RVM148464-1

Delivery Address
NHS Greater Glasgow and Clyde
Spinal Injuries Phillipshill WD Zone 3
GLN:204649, Central Stores
21 Dava Street, Govan
Hillington Glasgow
G51 2JA
Scotland

CIP Carriage and Insurance Paid To * Incoterms(r) 2020

Delivery Reference DVM148464-1 Contact emily.morton@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
4420808 Tariff 9018199000 CoO Germany	VersaStream Viamed CO2 Sampling Line Nasal, Paediatric, Long-term Box of 25	1	240.00	48.00	288.00
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841612667		12.00	2.40	14.40

Total Net: 252.00
Total Vat: 50.40
Total: 302.40

Banking details
Bank Barclays Bank PLC
Sort Code 20-78-42
Account Number 00906662
IBAN GB05BUKB20784200906662
BIC BUKGB22
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.