Invoice Address North Cumbria Integrated Care NHS FT Accounts Payable Parkhouse Building Kingmoor Park, Baron Way Carlisle CA6 4SJ

Delivery Address West Cumberland Hospital Receipt and Distribution Homewood Road Whitehaven CA28 8JG

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
EORI No: GB287389593000

Tracking Number

Chloe Banks Contact Name Contact Tel 01946523794 00000970 Account Customer Reference RNNN400203164

Date 09 Mar 2024

1Z9W96386841713076

Priced In **UK Pounds**



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

Delivery Reference DVM148498-1 Contact kate.griffiths@viamed.co.uk

| Item Reference | Description | Quantity | Unit | Unit Vat | Total |
|---|--|----------|-------|----------|-------|
| 1440000 Tariff 9018199000 CoO United Kingdom | Labour charge - Repair of Faulty/Damaged V1000 Foetal Heart Simulator. | 1 | 22.50 | 4.50 | 27.00 |
| | | | | | |
| 1480000 Tariff 9018199000 CoO United Kingdom | S/N: GE71743940, SRS68704, SRN36277 V1000 Foetal Heart Simulator | 1 | 60.00 | 12.00 | 72.00 |
| | Service and Functional Check | | | | |
| | SRS68704, SRN36277 | | | | |
| 1430309 Tariff 9031808000 CoO United Kingdom 1430295 Tariff 90181990-00 CoO United Kingdom PPUPS1 | V1000 Transducer Interface Cushion. | 1 | 0.00 | 0.00 | 0.00 |
| | SRS68704, SRN36277 | | | | |
| | V1000 Keypad Membrane Assembly. | 1 | 35.00 | 7.00 | 42.00 |
| | SRS68704, SRN36277 | | | | |
| | UPS Courier Delivery - Standard | | 12.00 | 2.40 | 14.40 |
| | AWB:1Z9W96386841713076 | | | | |

Total Net: 129.50 Total Vat: 25.90 Total: 155.40

Banking details

Barclays Bank PLC Bank 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.

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.

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