**Invoice Address** Lewisham and Greenwich NHS Trust RJ2 Payables 4715 **PO BOX 312** Leeds **LS11 1HP** 

Supplier Viamed Ltd 15 Station Road Cross Hills Cross Hills
Keighley, West Yorkshire
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Chris Graham Contact Name Contact Tel 02083333000 00003000 Account Customer Reference 99442745 Date 12 Apr 2024

Tracking Number 1Z9W96386841095959

Priced In **UK Pounds** 

Delivery Address University Hospital Lewisham Main Stores Goods Inwards High Street Lewisham **SE13 6LH** 

## Invoice RVM149339-1

CIP Carriage and Insurance Paid To University Hosp Lewisham, UK \* Incoterms(r) 2020

## Delivery Reference DVM149339-1 Contact janine.gill@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
2810050 Tariff 90181990-00 CoO China	MD300-C29 OLED Finger Pulse Oximeter	5	14.59	2.92	87.54
	S/N:202569975959-202569975960,				
PPUPS1	UPS Courier Delivery - Standard		0.00	0.00	0.00
	AWB:1Z9W96386841095959				

**Total Net:** 72.95 Total Vat: 14.59 Total: 87.54

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.