

Invoice Address  
University Hospitals of Leicester NHST  
Leicester Royal Infirmary  
Accounts Payable Department  
P O Box 189  
Leicester  
LE1 5WP

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 Supplies  
Contact Tel 03003031573  
Account 00002600  
Customer Reference MM152802  
Date 19 Apr 2024  
Tracking Number 1Z9W96386841810550  
Priced In UK Pounds

## Invoice RVM149486-1

Delivery Address  
Leicester Royal Infirmary  
Ward 11, LV 4 Bal Build  
C/O Materials Handling Unit  
Gate 9, Havelock Street  
Leicester  
LE2 7HA

CIP Carriage and Insurance Paid To Leicester Royal Infirmary, UK \* Incoterms(r) 2020

Delivery Reference DVM149486-1 Contact aqib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0021013 Tariff 90181990-00 CoO United States	Posey Sensor Wraps Model 6554 Box of 12	1	15.80	3.16	18.96
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841810550		0.00	0.00	0.00

Total Net: 15.80  
Total Vat: 3.16  
Total: 18.96

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.