Invoice Address West Suffolk NHSFT Finance Dep - Accounts Payable Hardwick Lane Bury St Edmunds **IP33 2QZ**

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

Contact Name

Supplier Viamed Ltd 15 Station Road

Procurement Department

Contact Tel 01284712826 00000835 Account 007013997 Customer Reference Date 08 Aug 2024

1Z9W96386840774593 Tracking Number

Priced In **UK Pounds**

Delivery Address West Suffolk NHS Foundation Trust Main Stores Hardwick Lane Bury St Edmunds IP33 2QZ

Invoice RVM149729-1

CIP Carriage and Insurance Paid To West Suffolk NHSFT, UK * Incoterms(r) 2020

Delivery Reference DVM149729-1 Contact emily.morton@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
4420869 Tariff 9018199000 CoO Germany	VersaStream Luer Lock Male CO2/O2 Sampling Line - Oral/Nasal Adult, Long-term, Box of 10	5	100.00	20.00	600.00
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386840774593		12.00	2.40	14.40

Total Net: 512.00 Total Vat: 102.40 Total: 614.40

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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