Invoice Address Antrim Area Hospital **Pharmacy Dept** 45 Bush Road **Antrim BT41 2RL**

Delivery Address Antrim Area Hospital Pharmacy Store Tardee House 60 Steeple Road Antrim

BT41 2RJ

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 Company Reg No: 01291765 EORI No: GB287389593000

Tracking Number

Simon Walker Contact Name Contact Tel 02894424000 00000128 Account **Customer Reference** HOL0508370 Date 14 May 2024

Priced In **UK Pounds**

Invoice RVM149842-1

CIP Carriage and Insurance Paid To Antrim Area Hospital Pharmacy De * Incoterms(r) 2020

Delivery Reference DVM149842-1 Contact janine.gill@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	22	11.45	2.29	302.28
PPUPS1	UPS Courier Delivery - Standard		0.00	0.00	0.00
PPUPS2	UPS Courier Delivery - Standard AWB:1Z9W96386841466414		8.00	1.60	9.60

Total Net: 259.90 Total Vat: 51.98 Total: 311.88

1Z9W96386841466414

Banking details Bank

Barclays Bank PLC Sort Code 20-78-42 00906662 Account Number IBAN

BIC BUKBGB22
Terms & conditions https://www.viamed.co.uk/terms

GB05BUKB20784200906662

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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