Invoice Address Western Health and Social Care Trust Finance Department Cost Centre E0M688, Estates Western Trust, PO Box 1044 Ballymena **BT42 9BT** Northern Ireland

Delivery Address Altnagelvin Hospital Engineering Store Altnagelvin Estates Department Glenshane Road Derry BT47 6SB

Northern Ireland

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

CIP Carriage and Insurance Paid To Altnagelvin Area Hospital, UK * Incoterms(r) 2020

David Cochrane Contact Name Contact Tel 02871345171 00003463 Account Customer Reference NSA40905 Date 17 May 2024

Priced In **UK Pounds**

Invoice RVM150005-1

Delivery Reference DVM150005-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110072 Tariff 9019209000 CoO Germany	Viamed Oxygen Sensor R-22Vi - Pack of 2	4	72.00	14.40	345.60
	S/N:V107978/V108005, V107991/V107992, V107993/V107994, V107995/V107996				
PPUPS2	UPS Courier Delivery - Standard		9.17	1.83	11.00
	23 x 15 x 15cm				
	0.40 kg				
	AWB:179W96386840056663				

Total Net: 297.17 Total Vat: 59.43 Total: 356.60

1Z9W96386840056663

Banking details Bank Sort Code

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

GB05BUKB20784200906662 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.

Terms: Net 30 days from date of invoice.

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