

Invoice Address
South Western Ambulance Service NHSFT
RYF Payables 6555
PO Box 312
Leeds
LS11 1HP

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	Procurement
Contact Tel	01392261500
Account	00012543
Customer Reference	151252931
Date	07 Jun 2024
Tracking Number	1Z9W96386840898638
Priced In	UK Pounds

Invoice RVM150402-1

Delivery Address
SWASFT Community Responders
Unit 13 - 15
Kestrel Business Park
Sowton Industrial Estate
Exeter
EX2 7LA

CIP Carriage and Insurance Paid To South Western Ambulance, UK * Incoterms(r) 2020

Delivery Reference DVM150402-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
4420813 Tariff 9018199000 CoO Germany	VersaStream Viamed CO2 Sampling Line Oral/Nasal, Adult, Short-term Box of 25	1	200.00	40.00	240.00
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386840898638		12.00	2.40	14.40

Total Net:	212.00
Total Vat:	42.40
Total:	254.40

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.