

Invoice Address
Isle of Wight NHST
R1F Payables F245
PO Box 312
Leeds
LS11 1HP

Delivery Address
St Mary's Hospital
Parkhurst Road
Newport
PO30 5TG

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 Abbie Long
Contact Tel 07544379210
Account 00004205
Customer Reference 282167922
Date 12 Jul 2024
Tracking Number 1Z9W96386840841297
Priced In UK Pounds

Invoice RVM151039-1

CIP Carriage and Insurance Paid To St Marys Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM151039-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1480000 Tariff 9018199000 CoO United Kingdom	V1000 Foetal Heart Simulator Service and Functional Check	1	60.00	12.00	72.00
	S/N: PR03072A10, SRS68831, SRN36519				
1430309 Tariff 9031808000 CoO United Kingdom PPUPS1	V1000 Transducer Interface Cushion SRS68831, SRN36519 UPS Courier Delivery - Standard AWB:1Z9W96386840841297	1	0.00 12.00	0.00 2.40	0.00 14.40

Total Net: 72.00
Total Vat: 14.40
Total: 86.40

Banking details
Bank Barclays Bank PLC
Sort Code 20-78-42
Account Number 00906662
IBAN GB05BUKB20784200906662
BIC BUKGBB22
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.