Invoice Address East and North Herts NHS Trust RWH Payables 6435 PO Box 312 Leeds **LS11 1HP**

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

Procurement Contact Name Contact Tel 01438314333 00004870 Account Customer Reference 76422725 Date 23 Sep 2024

1Z9W96386876729226 Tracking Number

Priced In **UK Pounds**

Delivery Address Lister Hospital R and D Point - Deliveries Coreys Mill Lane Stevénage SG1 4AB

Invoice RVM152356-1

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

Delivery Reference DVM152356-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0021014 Tariff 90181990-00 CoO United States	Posey Sensor Wraps Model 6554 case of 48 boxes	1	496.50	99.30	595.80
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876729226		0.00	0.00	0.00

Total Net: 496.50 Total Vat: 99.30

Total: 595.80

Banking details Bank

Barclays Bank PLC 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.

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.

Page 1