Invoice Address NHS Forth Valley Financial Services Accounts Payable Department Administration Building Falkirk Community Hospital **Falkirk** FK1 5SU

**Delivery Address** Forth Valley Royal Hospital VL199 0701 Medical Physics Block J First Floor Larbert FK5 4WR

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

Kirsty West Contact Name Contact Tel 01324566955 00004880 Account **Customer Reference** VMF14659242 Date 10 Oct 2024

Tracking Number 1Z9W96386877929731

Priced In **UK Pounds** 

## Invoice RVM152720-1

CIP Carriage and Insurance Paid To Forth Valley Royal Hospital, UK \* Incoterms(r) 2020

## Delivery Reference DVM152720-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1410000 Tariff 90318080-00 CoO U.K. PPUPS1	Foetal Heart Simulator V1000	1	659.00	131.80	790.80
	UPS Courier Delivery - Standard AWB:1Z9W96386877929731		12.00	2.40	14.40

Total Net: 671.00 Total Vat: 134.20

Total: 805.20

Banking details Bank

Barclays Bank PLC Sort Code 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.

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