Invoice Address Betsi Cadwaladr University Health Board PO Box 117 Pontypool NP4 4DP

Supplier Viamed Ltd 15 Station Road Cross Hills Cross Hills
Keighley, West Yorkshire
BD20 7DT, United Kingdom
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VAT Reg No: GB287389593
Company Reg No: 01291765
EORI No: GB287389593000

Procurement Contact Name 01978291100 Contact Tel 00005500 Account Customer Reference 10033038 Date 20 Nov 2024

Tracking Number 1Z9W96386876202080

Priced In **UK Pounds**

Delivery Address Wrexham Maelor Hospital YMW Children Ward Croesnewydd Road Wrexham **LL13 7TD**

Invoice RVM153475-1

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

Delivery Reference DVM153475-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0021013 Tariff 90181990-00 CoO United States	Posey Sensor Wraps Model 6554 Box of 12	1	15.80	3.16	18.96
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876202080		0.00	0.00	0.00

Total Net: 15.80 Total Vat: 3.16

Total: 18.96

Banking details

Barclays Bank PLC Bank 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.