Invoice Address Manchester University NHSFT Accounts Payable - Central Invoices Finance and Procurement Business Unit Trafford General Hospital Davyhulme M41 5SL

Delivery Address North Manchester General Hospital Receipt and Distribution Via Normanton Trunk Delauney Road Crumpsall M8 5RB

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

Tracking Number

Robin John Contact Name 01617264824 Contact Tel 00003580 Account Customer Reference 000480368 Date 04 Dec 2024

Priced In **UK Pounds**

Invoice RVM153733-1

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

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110072 Tariff 9019209000 CoO Germany	Viamed Oxygen Sensor R-22Vi - Pack of 2	4	72.00	14.40	345.60
	S/N:V108693/V108694, V108695/V108696, V108697/V108698, V108699/V108700,				
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386877620199		0.00	0.00	0.00

Delivery Reference DVM153733-1 Contact kate.griffiths@viamed.co.uk

Total Net: 288.00 Total Vat: 57.60 Total: 345.60

1Z9W96386877620199

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.

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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