

Invoice Address
Chelsea and Westminster Hospital NHSFT
West Middlesex University Hospital Site
Finance Department 2nd Floor East Wing
Twickenham Road
Isleworth
TW7 6AF

Supplier
Viamed Ltd
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Company Reg No: 01291765
EORI No: GB287389593000



Contact Name	Procurement
Contact Tel	02083215326
Account	00002824
Customer Reference	CW231553
Date	20 Jan 2025
Tracking Number	1Z9W96386841516002
Priced In	UK Pounds

Invoice RVM154532-1

Delivery Address
Chelsea and Westminster Hospital
Receipt and Distribution
Stores
369 Fulham Road
London
SW10 9NH

CIP Carriage and Insurance Paid To Chelsea And Westminster Hosp, UK * Incoterms(r) 2020

Delivery Reference DVM154532-1 Contact emily.morton@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
4420901 Tariff 9018199000 CoO Germany	VersaStream Oridion CO2 Sampling Line Nasal, Adult, Short-term Box of 25	5	180.00	36.00	1,080.00
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841516002		12.00	2.40	14.40

Total Net:	912.00
Total Vat:	182.40
Total:	1,094.40

Banking details
Bank Barclays Bank PLC
Sort Code 20-78-42
Account Number 00906662
IBAN GB05BUKB20784200906662
BIC BUKGB22
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.