Invoice Address Aneurin Bevan University Health Board 342049 Accounts Payable OCR ABHB P O BOX 114 **Pontypool** NP4 4DJ

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



Contact Name Contact Tel Account Customer Reference Date

Rachel Lee 01633234234 00003836 34110049 24 Jan 2025

Tracking Number

1Z9W96386877959360

Priced In **UK Pounds**

Delivery Address St Woolos Hospital 321166 STW EBME Department Stow Hill Newport NP20 4SZ

Invoice RVM154613-1

CIP Carriage and Insurance Paid To St Woolos Hospital * Incoterms(r) 2020

Delivery Reference DVM154613-1 Contact agib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110021 Tariff 9019209000 CoO Germany	Viamed Oxygen Sensor R-22MEDV	3	0.00	0.00	0.00
	S/N:V121914-V121916				
PPUPS1	UPS Courier Delivery - Standard		0.00	0.00	0.00
	AWB:1Z9W96386877959360				

Total Net: 0.00 Total Vat: 0.00 Total: 0.00

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.

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