

Invoice Address  
Antrim Area Hospital  
Pharmacy Dept  
45 Bush Road  
Antrim  
BT41 2RL

Supplier  
Viamed Ltd  
15 Station Road  
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 Simon Walker  
Contact Tel 02894424000  
Account 00000128  
Customer Reference HOL/2140612  
Date 12 Feb 2025  
Tracking Number 1Z9W96386878729553  
Priced In UK Pounds

## Invoice RVM154919-1

Delivery Address  
Northern Health and Social Care Trust  
Pharmacy Store  
Tardree House  
60 Steeple Road  
Antrim  
BT41 2RJ

CIP Carriage and Insurance Paid To Antrim Area Hosp Pharmacy, UK \* Incoterms(r) 2020

Delivery Reference DVM154919-1 Contact aqib.majeed@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	14	11.75	2.35	197.40
PPUPS2	UPS Courier Delivery - Standard 32x24x24cm 0.8kg AWB:1Z9W96386878729553		12.00	2.40	14.40

Total Net: 176.50  
Total Vat: 35.30  
Total: 211.80

Banking details  
Bank Barclays Bank PLC  
Sort Code 20-78-42  
Account Number 00906662  
IBAN GB05BUKB20784200906662  
BIC BUKGBB22  
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.