**Invoice Address** University Hospitals of Leicester NHST Leicester Royal Infirmary Accounts Payable Department P O Box 189

Leicester LE15WP

**Delivery Address** Leicester Royal Infirmary Materials Handling Unit Gate 9 Havelock Street Leicester LE2 7HA

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

Company Reg No: 01291765 EORI No: GB287389593000

Roger Smith Contact Name 01162586487 Contact Tel 00002600 Account Customer Reference LR741313 Date 19 Feb 2025

Tracking Number 1Z9W96386878118098

Priced In **UK Pounds** 

## Invoice RVM155110-1

CIP Carriage and Insurance Paid To Leicester Royal Infirmary, UK \* Incoterms(r) 2020

## Delivery Reference DVM155110-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0212021	Temperature Probe	6	85.20	17.04	613.44
CoO E.U.	Skin Contact - Neonatal				
	6.35mm (1/4 inch) jack (mono)				
	Diameter: 6 mm				
	Model Ref: 2021				
PPUPS1	UPS Courier Delivery - Standard		0.00	0.00	0.00
	AWB:1Z9W96386878118098				

Total Net: 511.20 Total Vat: 102.24 Total: 613.44

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.