**Invoice Address** United Lincolnshire Hospitals NHS Trust Lincoln County Hospital Accounts Payable Greetwell Road Lincoln LN2 5QY

Delivery Address Pilgrim Hospital Clinical Engineering Dept. Sibsey Road Boston **PE21 9QS** 

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

Purchasing Contact Name Contact Tel 01205445205 00000600 Account Customer Reference U040660 Date 25 Feb 2025

Tracking Number 1Z9W96386840068810

Priced In **UK Pounds** 

## Invoice RVM155128-1

CIP Carriage and Insurance Paid To Pilgrim Hospital, UK \* Incoterms(r) 2020

## Delivery Reference DVM155128-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1480000 Tariff 9018199000 CoO United Kingdom	V1000 Foetal Heart Simulator Service and Functional Check	1	65.00	13.00	78.00
	S/N: PR065A33, SRS69025, SRN37621				
1430309 Tariff 9031808000 CoO United Kingdom	V1000 Transducer Interface Cushion SRS69025, SRN37621	1	0.00	0.00	0.00
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386840068810		12.00	2.40	14.40

**Total Net:** 77.00 Total Vat: 15.40 Total: 92.40

Banking details

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.

Barclays Bank PLC Bank