

Invoice Address
Northern Care Alliance NHSFT
C/O ELFS Business Services
PO Box 4418 Unit 2
Swindon
SN4 4RW

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 Josie Hamer
Contact Tel 01617897373
Account 00004450
Customer Reference RR370297
Date 07 Mar 2025
Tracking Number 1Z9W96386876878879
Priced In UK Pounds

Invoice RVM155243-1

Delivery Address
Northern Care Alliance NHSFT
Receipt and Distribution (Salford)
Stott Lane
Salford
Manchester
M6 8HD

CIP Carriage and Insurance Paid To Northern Care Alliance, UK * Incoterms(r) 2020

Delivery Reference DVM155243-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110579 Tariff 9019209000 CoO Germany	Oxygen sensor OOM113 S/N:A101257-A101260	4	41.55	8.31	199.44
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876878879		0.00	0.00	0.00

Total Net: 166.20
Total Vat: 33.24
Total: 199.44

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.