Invoice Address Betsi Cadwaladr University Health Board PO Box 117 Pontypool NP4 4DP

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

Rees Sheldon Contact Name Contact Tel Account Customer Reference

01745583910 00000580 10076885 27 Feb 2025

Date Tracking Number

1Z9W96386878001230

Priced In **UK Pounds** 

Delivery Address Glan Clwyd Hospital 111738 YGC **EMBE** Department Sarn Lane Bodelwyddan LL18 5ÚJ

## Invoice RVM155274-1

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

## Delivery Reference DVM155274-1 Contact agib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110047 Tariff 9019209000 CoO Germany PPUPS1	Viamed Oxygen Sensor R-47V	1	77.00	15.40	92.40
	UPS Courier Delivery - Standard S/N:1Z9W96386878001230		0.00	0.00	0.00

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

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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