**Invoice Address** NHS Greater Glasgow and Clyde Payments Department PO Box 7388 Glasgow G51 9BS

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

Sarah Cuthbertson Contact Name 01412111200 Contact Tel 00001810 Account Customer Reference GCGS15135263

> 06 Mar 2025 1Z9W96386877591499

Priced In **UK Pounds** 

**Delivery Address** Leverndale Hospital Central Stores Dav-Lev Beith Ect Suite 21 Dava Street Govan Glasgow G51 2JA

## Invoice RVM155430-1

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

Date

Tracking Number

## Delivery Reference DVM155430-1 Contact agib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110452 Tariff 9019209000 CoO United States	Maxtec Oxygen Sensor MAX-550E with standard flow diverter	1	112.10	22.42	134.52
PPUPS1	S/N:KH66499028 UPS Courier Delivery - Standard AWB:1Z9W96386877591499		0.00	0.00	0.00

Total Net: 112.10 Total Vat: 22.42 Total: 134.52

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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