**Invoice Address Dorset County Hospital NHS Foundation Trust** Williams Avenue Dorchester DT1 2JY

Delivery Address Dorset County Hospital EBME Department Damers Road Dorchester

DT1 2JY

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

Supplies Contact Name 01305251150 Contact Tel 00001430 Account Customer Reference P222671 Date 17 Mar 2025

Tracking Number 1Z9W96386840620196

Priced In **UK Pounds** 

## Invoice RVM155619-1

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

## Delivery Reference DVM155619-1 Contact cathy.green@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
1430309 Tariff 9031808000 CoO United Kingdom PPUPS1	S/N:PR065A18 SRS69052 SRN37684 V1000 Transducer Interface Cushion SRS69052 SRN37684	1	0.00	0.00	0.00
	UPS Courier Delivery - Standard AWB:1Z9W96386840620196		12.00	2.40	14.40

**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.

