

Invoice Address
Southern Health and Social Care Trust
Shared Services Payment Centre
PO Box 1048
Ballymena
BT42 9BY

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 Yvonne McCreesh
Contact Tel 02838334444
Account 00001291
Customer Reference CB210235
Date 10 Apr 2025
Tracking Number 1Z9W96386841157838
Priced In UK Pounds

Invoice RVM155723-1

Delivery Address
Craigavon Hospital
Receipt and Distribution Centre
68 Lurgan Road
Portadown
BT63 5QQ

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

Delivery Reference DVM155723-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
4710030 Tariff 9018199000	AlcoTrue M Professional Breathalyser Kit - UK Comprises of: 1 x 4710010 AlcoTrue M Breathalyzer 1 x 4710020 AlcoPrint Printer 1 x 4720021 Large Carrying Case	1	918.30	183.66	1,101.96
PPUPS2	S/N:25020207 UPS Courier Delivery - Standard AWB:1Z9W96386841157838		8.21	1.64	9.85

Total Net: 926.51
Total Vat: 185.30
Total: 1,111.81

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.