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

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

Contact Name Contact Tel Account Customer Reference Date

Supplier Viamed Ltd 15 Station Road

Cross Hills

Josie Hamer 01617897373 00004450 RR374504 20 Mar 2025

Tracking Number

1Z9W96386878080271

Priced In **UK Pounds** 

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

## Invoice RVM155738-1

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

## Delivery Reference DVM155738-1 Contact agib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110045 Tariff 9019209000 CoO Germany	Viamed Oxygen Sensor R-45V	15	36.95	7.39	665.10
	S/N:V101872-V101886				
PPUPS1	UPS Courier Delivery - Standard		0.00	0.00	0.00
	AWB:1Z9W96386878080271				

Total Net: 554.25 Total Vat: 110.85

Total: 665.10

Banking details

Bank Sort Code 20-78-42 00906662 Account Number

IBAN BIC BUKBGB22
Terms & conditions https://www.viamed.co.uk/terms

GB05BUKB20784200906662

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.

Barclays Bank PLC