**Invoice Address** Norfolk Community Health and Care NHST RY3 Payables F795 PO Box 312 Leeds **LS11 1HP** 

Supplier Viamed Ltd 15 Station Road Cross Hills Cross Hills
Keighley, West Yorkshire
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VAT Reg No: GB287389593
Company Reg No: 01291765 Company Reg No: 01291765 EORI No: GB287389593000

Molly Wright Contact Name Contact Tel 01603776776 00003912 Account **Customer Reference** 337009309 Date 11 Apr 2025

Tracking Number 1Z9W96386840723521

Priced In **UK Pounds** 

Delivery Address Norfolk Community Health and Care NHST FAO Amanda Armitage Red House Clinical Engineering 160 Hellesdon Park Road Norwich NR6 5DR

## Invoice RVM156191-1

CIP Carriage and Insurance Paid To Norfolk Community Health, UK \* Incoterms(r) 2020

## Delivery Reference DVM156191-1 Contact agib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
2810050 Tariff 90181990-00 CoO China	MD300-C29 OLED Finger Pulse Oximeter	30	15.00	3.00	540.00
	S/N:202569976907-202569976930,202569976941				
PPUPS1	UPS Courier Delivery - Standard		0.00	0.00	0.00
	AWB:1Z9W96386840723521				

Total Net: 450.00 Total Vat: 90.00

Total: 540.00

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.

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.