

Invoice Address  
Northern Health and Social Care Trust  
Antrim Area Hospital  
Pharmacy Department  
45 Bush Road  
Antrim  
BT41 2RL  
Northern Ireland

Delivery Address  
Northern Health and Social Care Trust  
Pharmacy Store  
Tardree House  
60 Steeple Road  
Antrim  
BT41 2RJ

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 Simon Walker  
Contact Tel 02894424000  
Account 00000126  
Customer Reference HOL/2335494  
Date 11 Apr 2025  
Tracking Number 1Z9W96386876022962  
Priced In UK Pounds

## Invoice RVM156198-1

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

Delivery Reference DVM156198-1 Contact aqib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0021013 Tariff 90181990-00 CoO United States	Posey Sensor Wraps Model 6554 Box of 12	14	11.75	2.35	197.40
PPUPS2	UPS Courier Delivery - Standard 32 x 24 x 24cm 1kg AWB:1Z9W96386876022962		8.22	1.64	9.86

Total Net: 172.72  
Total Vat: 34.54  
Total: 207.26

Banking details  
Bank Barclays Bank PLC  
Sort Code 20-78-42  
Account Number 00906662  
IBAN GB05BUKB20784200906662  
BIC BUKGBB22  
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.