

Invoice Address
Swansea Bay University Health Board
NWSSP - Account Payable
PO Box 113
Pontypool
NP4 4DH

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 Procurement Department
Contact Tel 01792702222
Account 00005060
Customer Reference 92591373
Date 17 Jun 2025
Tracking Number 1Z9W96386878174705
Priced In UK Pounds

Invoice RVM157001-1

Delivery Address
Morrison Hospital
Receipt And Distribution Store
Procurement
Heol Maes Eglwys
Swansea
SA6 6NL

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

Delivery Reference DVM157001-1 Contact kate.griffiths@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	10	12.10	2.42	145.20
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386878174705		0.00	0.00	0.00

Total Net: 121.00
Total Vat: 24.20
Total: 145.20

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.