Invoice Address Nottingham University Hospital **Accounts Payable Section** City Hospital Campus **Hucknall Road Nottingham** NG5 1PB

Delivery Address Nottingham University Hospital City Distribution Hub Service Road 1 City Hospital Campus Hucknall Road Nottingham

NG5 1PB

Supplier Viamed Ltd 15 Station Road Cross Hills

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

Yusra Fatima Contact Name 01159691169 Contact Tel 00003930 Account Customer Reference 202021027 Date 04 Jun 2025

Tracking Number 1Z9W96386877352729

Priced In **UK Pounds**

Invoice RVM157096-1

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

Delivery Reference DVM157096-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110045 Tariff 9019209000 CoO Germany	Viamed Oxygen Sensor R-45V	3	39.00	7.80	140.40
,	S/N:V101911-V101913				
PPUPS1	UPS Courier Delivery - Standard		0.00	0.00	0.00
	AWB:1Z9W96386877352729				

Total Net: 117.00 Total Vat: 23.40

Total: 140.40

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.

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.

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