Invoice Address Norfolk and Norwich UH FT RM1 Payables G105 PO Box 312 Leeds **LS11 1HP**

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



Contact Name Contact Tel Account Customer Reference Date

Chloe Bostock 01603286286 00003890 358050864 17 Jun 2025

Tracking Number

1Z9W96386876548118

Priced In

UK Pounds

Delivery Address Norfolk and Norwich University Hospitals NHSFT RM1 Clinical Engineering Mechanical WV4489 Colney Lane Norwich NR4 7UY

Invoice RVM157115-1

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

Delivery Reference DVM157115-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110023 Tariff 9019209000 CoO Germany	Viamed Oxygen Sensor R-23V	2	41.05	8.21	98.52
,	S/N:V125385-V125386				
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876548118		0.00	0.00	0.00

Total Net: 82.10 Total Vat: 16.42 Total: 98.52

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.