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 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

Adebowale Lawal Contact Name 01159691169 Contact Tel 00003930 Account Customer Reference 202021609 Date 13 Jun 2025

Tracking Number 1Z9W96386877999933

Priced In **UK Pounds**

Invoice RVM157271-1

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

Delivery Reference DVM157271-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110017 Tariff 901920900 CoO United States	Teledyne Sensor R-17MED	3	51.70	10.34	186.12
	S/N:259760,259771-259772				
PPUPS1	UPS Courier Delivery - Standard		0.00	0.00	0.00
	AWB:1Z9W96386877999933				

Total Net: 155.10 Total Vat: 31.02

Total: 186.12

Banking details

Bank Sort Code 20-78-42 00906662 Account Number

IBAN GB05BUKB20784200906662 BIC BUKBGB22 Terms & conditions https://www.viamed.co.uk/terms

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.

Barclays Bank PLC Terms: Net 30 days from date of invoice.

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