Invoice Address Cwm Taf Morgannwg UHB PO Box 111 **Pontypool** NP4 4DF

Delivery Address

Coity Road Bridgend CF31 1RQ

Princess of Wales Hospital

533154 Central Delivery Suite

Supplier Viamed Ltd 15 Station Road Cross Hills Cross Hills
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Contact Name Contact Tel Account Customer Reference

Procurement 01656752752 00004195 68152087

Date **Tracking Number** 08 Aug 2025 1Z9W96386876009754

UK Pounds

Priced In

Invoice RVM158333-1

CIP Carriage and Insurance Paid To Princess Of Wales Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM158333-1 Contact sophie.lines@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	2	13.15	2.63	31.56
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876009754		0.00	0.00	0.00

Total Net: 26.30 Total Vat: 5.26

Total: 31.56

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.