**Invoice Address** Lewisham and Greenwich NHS Trust RJ2 Payables 4715 **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 Company Reg No: 01291765 EORI No: GB287389593000



Delivery Address University Hospital Lewisham EBME C Block High Street

Chris Graham Contact Name 02083333000 Contact Tel 00003000 Account 99509996 Customer Reference Date 07 Oct 2025

Tracking Number 1Z9W96386876336301

Priced In **UK Pounds** 

## Invoice RVM158886-1

CIP Carriage and Insurance Paid To University Hosp Lewisham, UK \* Incoterms(r) 2020

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0014062 Tariff 90181990-00	Nellcor DOC-10 SpO2 sensor/extension	10	80.80	16.16	969.60
	S/N:A2464J1025,A2565J1001,A2566J1001-A2566J1008				
PPUPS1	UPS Courier Delivery - Standard		12.00	2.40	14.40
	AWB:1Z9W96386876336301				

Delivery Reference DVM158886-1 Contact agib.majeed@viamed.co.uk

**Total Net:** 820.00 Total Vat: 164.00 Total: 984.00

Banking details Bank

Lewisham

**SE13 6LH** 

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.