**Invoice Address** West Suffolk NHSFT Finance Dep - Accounts Payable Hardwick Lane Bury St Edmunds **IP33 2QZ** 

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

**IMS Buyer** Contact Name 01284712826 Contact Tel 00000835 Account **Customer Reference** 800038054 Date 09 Oct 2025

Tracking Number 1Z9W96386877963926

Priced In **UK Pounds** 

Delivery Address West Suffolk NHS Foundation Trust Main Stores Hardwick Lane Bury St Edmunds IP33 2QZ

## Invoice RVM159425-1

CIP Carriage and Insurance Paid To West Suffolk NHSFT, UK \* Incoterms(r) 2020

## Delivery Reference DVM159425-1 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	6	12.10	2.42	87.12
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386877963926		0.00	0.00	0.00

Total Net: 72.60 Total Vat: 14.52 Total: 87.12

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.