



## Invoice Address

Liverpool Womens NHSFT  
Liverpool Womens Hospital  
Finance Department  
Crown Street  
Liverpool  
L8 7SS

Supplier  
Viamed Ltd  
15 Station Road  
Cross Hills  
Keighley, West Yorkshire  
BD20 7DT, United Kingdom  
Tel: +44 (0) 1535 634542  
Fax: +44 (0) 1535 635582  
Email: [info@viamed.co.uk](mailto:info@viamed.co.uk)  
VAT Reg No: GB287389593  
Company Reg No: 01291765  
EORI No: GB287389593000

Contact Name	Procurement
Contact Tel	01517089988
Account	00002662
Customer Reference	REPN400033596
Date	08 Jan 2026
Tracking Number	1Z9W96386877377408
Priced In	UK Pounds

Invoice RVM161061-1

Delivery Address  
Liverpool Womens NHSFT  
Receiving and Distribution  
Loading Bay  
Crown Street  
Liverpool  
L8 7SS

CIP Carriage and Insurance Paid To Liverpool Womens Hospital, UK \* Incoterms(r) 2020

Delivery Reference DVM161061-1 Contact emily.morton@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	30	11.75	2.35	423.00
PPUP\$1	UPS Courier Delivery - Standard AWB:1Z9W96386877377408	0.00	0.00	0.00	0.00

Total Net: 352.50  
Total Vat: 70.50  
Total: 423.00

Banking details  
Bank Barclays Bank PLC  
Sort Code 20-78-42  
Account Number 00906662  
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.