

Invoice Address
Betsi Cadwaladr University Health Board
PO Box 117
Pontypool
NP4 4DP

Supplier
Viamed Ltd
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Contact Name Jade Butler
Contact Tel 01745583910
Account 00000580
Customer Reference 10257794
Date 25 Mar 2026
Tracking Number 1Z9W96386878263761
Priced In UK Pounds

Invoice RVM162613-1

Delivery Address
Glan Clwyd Hospital
111738 YGC
EMBE Department
Sarn Lane
Bodelwyddan
LL18 5UJ

CIP Carriage and Insurance Paid To Glan Clwyd Hospital, UK * Incoterms 2020

Delivery Reference DVM162613-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110017 Tariff 901920900 CoO United States	Teledyne Sensor R-17MED S/N:326458-326460	3	51.70	10.34	186.12
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386878263761		0.00	0.00	0.00

Total Net: 155.10
Total Vat: 31.02
Total: 186.12

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.