Invoice Address 2Gether Support Solutions Ltd Payments Department, Trust Offices Kent and Canterbury Hospital **Ethelbert Road** Canterbury CT1 3NG

Delivery Address William Harvey Hospital EME Manager, Main Stores Kennington Road Ashford TN24 OLZ

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

Tracking Number

Company Reg No: 01291765 EORI No: GB287389593000 Yogi Gurung Contact Name 01233616601 Contact Tel 00000150 Account 44007078 Customer Reference Date 20 Mar 2024

Priced In **UK Pounds**

Invoice RVM148614-1

CIP Carriage and Insurance Paid To William Harvey Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM148614-1 Contact janine.gill@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1480000 Tariff 9018199000 CoO United Kingdom	V1000 Foetal Heart Simulator Service and Functional Check	1	60.00	12.00	72.00
	S/N: PR01847A12, SRS68718, SRN36288				
1430309 Tariff 9031808000 CoO United Kingdom	V1000 Transducer Interface Cushion. SRS68718, SRN36288	1	0.00	0.00	0.00
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842732400		10.00	2.00	12.00

Total Net: 70.00 Total Vat: 14.00 Total: 84.00

1Z9W96386842732400

Banking details

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

IBAN GB05BUKB20784200906662 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.