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

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

Samuel Burnett Contact Name 01745583910 Contact Tel 00000580 Account 10011242 Customer Reference Date 07 Oct 2024

Tracking Number 1Z9W96386841099428

Priced In **UK Pounds** 

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

## Invoice RVM152620-1

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

## Delivery Reference DVM152620-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110049 Tariff 90271090 CoO Germany	Viamed Oxygen Sensor R-49V	4	38.00	7.60	182.40
,	S/N:V104431-V104434				
PPUPS1	UPS Courier Delivery - Standard		0.00	0.00	0.00
	AWB:1Z9W96386841099428				

Total Net: 152.00 Total Vat: 30.40 Total: 182.40

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.