Invoice Address Manchester University NHSFT Accounts Payable - Central Invoices Finance and Procurement Business Unit Trafford General Hospital Davyhulme M41 5SL

Delivery Address North Manchester General Hospital **EBME** Department Delaunays Road Crumpsall Manchester

M8 5RB

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

Tracking Number

Louise Wilkinson Contact Name Contact Tel 01617202347 00003580 Account Customer Reference 000538519 Date 22 Oct 2025

Priced In **UK Pounds**

Invoice RVM159677-1

CIP Carriage and Insurance Paid To North Manchester Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM159677-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110072 Tariff 9019209000 CoO Germany	Viamed Oxygen Sensor R-22Vi - Pack of 2	2	78.00	15.60	187.20
	S/N:V109642/V109643, V109644/V109645,				
PPUPS1	UPS Courier Delivery - Standard		0.00	0.00	0.00
	AWB:1Z9W96386877456680				

Total Net: 156.00 Total Vat: 31.20

1Z9W96386877456680

Total: 187.20

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.

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.

