Invoice Address University Hospitals of Leicester NHST Leicester Royal Infirmary Accounts Payable Department P O Box 189 Leicester LE15WP

Delivery Address Leicester General Hospital Receipts and Distribution Gwendolen Road

Leicester LE5 4PW 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 Company Reg No: 01291765 EORI No: GB287389593000

Linu Mathew Contact Name Contact Tel 03003031573 00002590 Account Customer Reference LG619578 Date 10 Nov 2025

Tracking Number 1Z9W96386842216683

Priced In **UK Pounds**

Invoice RVM159719-1

CIP Carriage and Insurance Paid To Leicester General Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM159719-1 Contact agib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110043 Tariff 9019209000 CoO Germany	Viamed Oxygen Sensor R-43V - Pack of 2 Warranty period: 6 months from invoice date	12	78.50	15.70	1,130.40
	S/N:V111388/V111385,V111389/V111379				
	V111391/V111420,V111392/V111407,				
	V111398/V111417,V111399/V111428, V111400/V111438,V111401/V111439,				
	V111402/V111387,V111403/V111418,				
	V111408/V111397,V111409/V111415				
PPUPS1	UPS Courier Delivery - Standard		0.00	0.00	0.00
	AWB:1Z9W96386842216683				

Total Net: 942.00 Total Vat: 188.40 Total:

1,130.40

Banking details

Barclays Bank PLC 20-78-42 00906662 Account Number

IBAN BUKBGB22

GB05BUKB20784200906662 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.

Bank Sort Code

Page 1