

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

Supplier
Viamed Ltd
15 Station Road
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



Contact Name **Shane Tucker**
Contact Tel **01978291100**
Account **00005500**
Customer Reference **10199321**
Date **06 Jan 2026**
Tracking Number **1Z9W96386876710512**
Priced In **UK Pounds**

Delivery Address
Wrexham Maelor Hospital
Medical Engineering
Croesnewydd Road
Wrexham
LL13 7TD

Invoice RVM160166-1

CIP Carriage and Insurance Paid To Wrexham Maelor Hospital, UK * Incoterms(r) 2020

Delivery Reference **DVM160166-1** Contact **aqib.majeed@viamed.co.uk**

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110022 Tariff 9019209000 CoO United States	Teledyne Oxygen Sensor R-22MED S/N:269200-269202	3	46.80	9.36	168.48
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876710512		0.00	0.00	0.00
				Total Net:	140.40
				Total Vat:	28.08
				Total:	168.48

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 full has been received.