**Invoice Address** NHS Greater Glasgow and Clyde Payments Department PO Box 7388 Glasgow G51 9BS

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

Supplier Viamed Ltd

Cross Hills

Contact Name Rory Hunter 01412114283 Contact Tel 00001870 Account GMPR16012984 Customer Reference Date 27 Nov 2025

Tracking Number 1Z9W96386876428364

Priced In **UK Pounds** 

Delivery Address Victoria Hospital Clinical Physics First Floor Grange Road Glasgow G42 9LF

## Invoice RVM160362-1

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

## Delivery Reference DVM160362-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110047 Tariff 9019209000 CoO Germany	Viamed Oxygen Sensor R-47V	2	73.10	14.62	175.44
,	S/N:V108318-V108319				
PPUPS1	UPS Courier Delivery - Standard		0.00	0.00	0.00
	AWB:1Z9W96386876428364				

Total Net: 146.20 Total Vat: 29.24 Total: 175.44

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.

Page 1

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.