

**Invoice Address**

Glos Hospitals NHS Foundation Trust  
Gloucestershire Shared Services  
Victoria Warehouse, The Docks  
Gloucester  
Gloucestershire GL1 2EL

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](mailto:info@viamed.co.uk)  
VAT Reg No: GB287389593  
Company Reg No: 01291765  
Eori No: GB287389593000



Contact Name	Procurement
Contact Tel	03004222665
Account	00001902
Customer Reference	GSS914056
Date	11 May 2023
Tracking Number	1Z9W96386877715239

Delivery Address  
Gloucestershire Royal Hospital  
Maternity Ward  
C/O Distribution Stores  
Off Horton Road  
Gloucester  
GL1 3NN

**Invoice RVM143433-1**

CIP Carriage and Insurance Paid To Glos Royal Hospital, UK \* Incoterms® 2020

Delivery Reference DVM143433-1 Contact [aqib.majeed@viamed.co.uk](mailto:aqib.majeed@viamed.co.uk)

Item Reference	Description	Quantity	£ Unit	£ Unit Vat	£ Total
1114005 Tariff 9018199000 CoO United States	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	2	48.00	9.60	115.20
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386877715239		10.00	2.00	12.00

Total Net: £	106.00
Total Vat: £	21.20
Total: £	127.20

**Banking details**

Bank Barclays Bank PLC  
Sort Code 20-78-42  
Account Number 00906662  
IBAN GB05BUKB20784200906662  
BIC BUKGBB22  
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.