

Viamed Ltd
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Viamed Ltd



Delivery Address

St Helier Hospital
 Receipt And Despatch
 Wrythe Lane
 Carlshalton
 SM5 1AA

Invoice Address

Epsom And St Helier University Hospital
 RVR Payables 7545
 PO Box 312
 Leeds
 LS11 1HP

Contact Name Contact Tel

: Procurement
 : 02033223912

Account 00001020
 Customer Reference 249258922
 Date 01 Nov 2023
 Priority : 3
 Due Date : 02 Nov 2023
 Priced In : UK Pounds

Order Confirmation CVM146442

Page 1

CIP Carriage and Insurance Paid To St Helier Hospital, UK * Incoterms(R) 2020

Your Viamed Contact for this Order Confirmation : kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	4	55.30	11.06	265.44
1114006	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	1	55.30	11.06	66.36
PPUPS1	UPS Courier Delivery - Standard	1	12.00	2.40	14.40

Total Net: 288.50
 Total Vat: 57.70
 Total: 346.20

Banking details
 Bank BIC
 Sort Code 20-78-42
 Account Number 00906662
 IBAN GB05BUKB20784200906662
 BIC BUKGBB22
 Terms and 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.