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Viamed Ltd



Delivery Address

Liverpool Womens NHSFT
 Receipting And Distribution
 Loading Bay
 Crown Street
 Liverpool
 L8 7SS

Invoice Address

Liverpool Womens NHSFT
 Liverpool Womens Hospital
 Finance Department
 Crown Street
 L8 7SS

Contact Name

Contact Tel : 01517089988

Account

Customer Reference 00002662

Date REP400024884

Priority 09 Nov 2023

Due Date : 3

Priced In : 10 Nov 2023

: UK Pounds

Order Confirmation CVM146618

Page 1

CIP Carriage and Insurance Paid To Liverpool Womens 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
0021013	Posey Sensor Wraps Model 6554 Box of 12	20	11.45	2.29	274.80
1114006	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	1	55.30	11.06	66.36
1114005	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	1	55.30	11.06	66.36
PPUPS1	UPS Courier Delivery - Standard	1	0.00	0.00	0.00

Total Net: 339.60

Total Vat: 67.92

Total: 407.52

Banking details

Bank BIC
 Sort Code Barclays Bank PLC
 Account Number 20-78-42
 IBAN 00906662
 BIC GB05BUKB20784200906662
 Terms and conditions BUKBGB22
<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.