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Viamed Ltd



Delivery Address

St Michaels Hospital
 Special Care Baby Unit
 Level D
 Southwell Street
 Bristol
 BS2 8EG

Invoice Address

University Hospitals Bristol NHSFT
 UHBWFT Creditor Payment Site
 PO Box 3214, Trust HQ
 Marlborough Street
 Bristol
 BS1 9JR

Contact Name

: Procurement

Contact Tel

: 01173425324

Account

00000691

Customer Reference

N538241

Date

21 Nov 2023

Priority

: 3

Due Date

: 22 Nov 2023

Priced In

: UK Pounds

Order Confirmation CVM146798

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

Your Viamed Contact for this Order Confirmation : janine.gill@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

PPUPS1	UPS Courier Delivery - Standard	1	10.00	2.00	12.00
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Total Net: 231.20

Total Vat: 46.24

Total: 277.44

Banking details

Bank BIC
 Sort Code 20-78-42
 Account Number 00906662
 IBAN GB05BUKB20784200906662
 BIC BUKGB22
 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.