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Viamed Ltd



Delivery Address	Invoice Address	Contact Name	: Procurement
		Contact Tel	: 02083215326
West Middlesex University Hospital	Chelsea And Westminster Hospital NHSFT	Account	00002340
R And D Department	West Middlesex University Hospital Site	Customer Reference	CW234589
Twickenham Road	Finance Department 2nd Floor East Wing	Date	07 Mar 2025
Isleworth	Twickenham Road	Priority	3
Middlesex	Isleworth		
TW7 6AF	TW7 6AF	Priced In	UK Pounds

Order Confirmation CVM155477

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CIP Carriage and Insurance Paid To West Middlesex University Hosp, * 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 Due Date 10 Mar 2025	4	12.10	2.42	58.08
1114005	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20 Due Date 10 Mar 2025	3	56.70	11.34	204.12
PPUPS1	UPS Courier Delivery - Standard	1	0.00	0.00	0.00

Total Net:	218.50
Total Vat:	43.70
Total:	262.20

Banking details	BIC
Bank	Barclays Bank PLC
Sort Code	20-78-42
Account Number	00906662
IBAN	GB05BUKB20784200906662
BIC	BUKBGB22
Terms and conditions	https://www.viamed.co.uk/terms