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Viamed Ltd



Delivery Address

Cumberland Infirmary
 Receipt And Distribution
 Newtown Road
 Carlisle
 CA2 7HY

Invoice Address

North Cumbria Integrated Care NHSFT
 Accounts Payable
 Parkhouse Building
 Kingmoor Park Baron Way
 Carlisle
 CA6 4SJ

Contact Name
 Contact Tel

: Purchasing Team
 : 01524511910

Account
 Customer Reference
 Date
 Priority

00000981
 RNNN400280845
 12 Aug 2025
 3

Order Confirmation CVM158419

Priced In

UK Pounds

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CIP Carriage and Insurance Paid To Cumberland Infirmary, UK * Incoterms(R) 2020

Your Viamed Contact for this Order Confirmation : sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114015	NeoMask Neonatal Phototherapy Mask Model: Type III - Large. Pack of 20.	1	46.00	9.20	55.20
PPUPS1	UPS Courier Delivery - Standard	1	8.00	1.60	9.60

Total Net: 54.00
 Total Vat: 10.80
 Total: 64.80

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>