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Viamed Ltd



Delivery Address

West Cumberland Hospital
 Receipt And Distribution
 Homewood Road
 Whitehaven
 CA28 8JG

Invoice Address

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

Contact Name Contact Tel

: Purchasing
 : 01524511910

Account

00000970

Customer Reference

RNNN400283256

Date

29 Aug 2025

Priority

3

Order Confirmation CVM158734

Priced In

UK Pounds

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

Your Viamed Contact for this Order Confirmation : aqib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114017	NeoMask Neonatal Phototherapy Mask Model: Type III - Small. Pack of 20	1	46.00	9.20	55.20
1114016	NeoMask Neonatal Phototherapy Mask Model: Type III - Medium. Pack of 20.	1	46.00	9.20	55.20
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	10.00	2.00	12.00

Total Net: 148.00

Total Vat: 29.60

Total: 177.60

Banking details

Bank
 Sort Code
 Account Number
 IBAN
 BIC

BIC
 Barclays Bank PLC
 20-78-42
 00906662
 GB05BUKB20784200906662
 BUKBGB22
 Terms and conditions <https://www.viamed.co.uk/terms>