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Viamed Ltd



Delivery Address

Norfolk and Norwich University
 Hospital
 Colney Lane
 Norwich
 NR4 7UY

Invoice Address

Norfolk And Norwich UH FT
 RM1 Payables G105
 PO Box 312
 Leeds
 LS11 1HP

Contact Name

Contact Tel

: Procurement

: 01603287461

Account

Customer Reference

Date

Priority

00003892

358062045

01 Sep 2025

3

Order Confirmation CVM158758

Priced In

UK Pounds

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CIP Carriage and Insurance Paid To Norfolk And Norwich Hosp, UK * Incoterms(R) 2020

Your Viamed Contact for this Order Confirmation : emily.morton@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	1	56.70	11.34	68.04
1114006	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	1	56.70	11.34	68.04
PPUPS1	UPS Courier Delivery - Standard	1	10.00	2.00	12.00

Total Net: 123.40

Total Vat: 24.68

Total: 148.08

Banking details
 Bank
 Sort Code
 Account Number
 IBAN
 BIC
 Terms and conditions

BIC
 Barclays Bank PLC
 20-78-42
 00906662
 GB05BUKB20784200906662
 BUKGB22
<https://www.viamed.co.uk/terms>