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Viamed Ltd



Delivery Address	Invoice Address	Contact Name	: Procurement
		Contact Tel	: 02033221935
North Middlesex University Hospital	Royal Free London NHSFT	Account	00003070
ATX231 Maternity And Transitional	Accounts Payable Finance Department	Customer Reference	RFG031045
Care C105 - Receipt And Deliv Refurb	Enfield Civic Centre (10th Floor)	Date	05 Dec 2025
Sterling Way	Silver Street	Priority	3
London	Enfield		
N18 1QX	EN1 3ES		

Order Confirmation CVM160558

Priced In

UK Pounds

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CIP Carriage and Insurance Paid To North Middlesex Uni Hospital, 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

PPUPS1	UPS Courier Delivery - Standard	1	8.00	1.60	9.60
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Total Net:	64.70
Total Vat:	12.94
Total:	77.64

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