

Viamed Ltd
 15 Station Road
 Cross Hills
 Keighley, West Yorkshire
 BD20 7DT, United Kingdom
 Tel: +44 (0) 1535 634542
 Fax: +44 (0) 1535 635582
 Email: info@viamed.co.uk
 VAT Reg No: GB287389593
 Company Reg No: 01291765
 Eori No: GB287389593000

Viamed Ltd



Delivery Address	Invoice Address	Contact Name	: Purchasing Team
Cumberland Infirmary	North Cumbria Integrated Care NHSFT	Contact Tel	: 01524 511910
Receipt And Distribution	Accounts Payable	Account	00000981
Newtown Road	Parkhouse Building	Customer Reference	RNNN400298518
Carlisle	Kingmoor Park Baron Way	Date	11 Dec 2025
CA2 7HY	Carlisle	Priority	3
	CA6 4SJ		

Order Confirmation CVM160663

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
1114016	NeoMask Neonatal Phototherapy Mask Model: Type III - Medium. Pack of 20.	1	46.00	9.20	55.20

PPUPS1	UPS Courier Delivery - Standard	1	8.00	1.60	9.60
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Total Net:	54.00
Total Vat:	10.80
Total:	64.80

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