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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	RF032610
Care C105 - Receipt And Deliv Refurb	Enfield Civic Centre (10th Floor)	Date	02 Feb 2026
Sterling Way	Silver Street	Priority	3
London	Enfield		
N18 1QX	EN1 3ES		

Order Confirmation CVM161435 Priced In UK Pounds
 CIP Carriage and Insurance Paid To North Middlesex Uni Hospital, UK * Incoterms(R) 2020 Page 1

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

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20 Due Date 03 Feb 2026	1	56.70	11.34	68.04
1114006	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20 Due Date 03 Feb 2026	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	BIC
Bank	Barclays Bank PLC
Sort Code	20-78-42
Account Number	00906662
IBAN	GB05BUKB20784200906662
BIC	BUKGB22
Terms and conditions	https://www.viamed.co.uk/terms