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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	RF035525
Care C105 - Receipt And Deliv Refurb	Enfield Civic Centre (10th Floor)	Date	22 Apr 2026
Sterling Way	Silver Street	Priority	3
London	Enfield		
N18 1QX	EN1 3ES		

Order Confirmation **CVM163043** Priced In UK Pounds  
Page 1  
CIP Carriage and Insurance Paid To North Middlesex Uni Hospital, UK \* Incoterms 2020

Your Viamed Contact for this Order Confirmation : [aqib.majeed@viamed.co.uk](mailto: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	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 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>