

Delivery Address
Peterborough City Hospital
Central Stores
Edith Cavell Campus
Bretton
Peterborough
PE3 9GZ

Supplier
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



Contact Name	Sharon Skeels
Contact Tel	01480418769
Account	00004113
Customer Reference	233333328
Date	22 Jul 2024

Invoice Address

North West Anglia NHS FT
RGN Payables 7455
PO Box 312
Leeds
LS11 1HP

Delivery Note DVM151185-1

CIP Carriage and Insurance Paid To Peterborough City Hosp, UK * Incoterms® 2020

UPS - Packages: 1 - Contact aqib.majeed@viamed.co.uk

Item Reference	Description	Ordered	Current Delivery	Remaining
1114007 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Micro Ref. R300P03 Pack of 20	1	1	0
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	1	1	0
1114005 Tariff 9018199000 CoO United States	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	1	1	0
0021013 Tariff 90181990-00 CoO United States	Posey Sensor Wraps Model 6554 Box of 12	12	12	0
PPUPS1	UPS Courier Delivery - Standard			

Banking details	
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