

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 | 233333505     |
| Date               | 23 Jul 2024   |

Invoice Address

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

## Delivery Note DVM151217-1

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

### UPS - Packages: 1 - Contact

| Item Reference                                    | Description                                                                    | Ordered | Current Delivery | Remaining |
|---------------------------------------------------|--------------------------------------------------------------------------------|---------|------------------|-----------|
| 1114005<br>Tariff 9018199000<br>CoO United States | EyeMax 2 Neonatal Phototherapy Mask - Regular<br>Ref. R300P01<br>Pack<br>of 20 | 2       | 2                | 0         |
| PPUPS1                                            | UPS Courier Delivery - Standard                                                |         |                  |           |

Banking details  
Bank Barclays Bank PLC  
Sort Code 20-78-42  
Account Number 00906662  
IBAN GB05BUKB20784200906662  
BIC BUKGBB22  
Terms and conditions <https://www.viamed.co.uk/terms>