

Delivery Address  
St Michaels Hospital  
Ward 73 Level E SMH  
Southwell Street  
Bristol  
BS2 8EG

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| Contact Name       | Procurement |
| Contact Tel        | 01173425324 |
| Account            | 00000691    |
| Customer Reference | N306971     |
| Date               | 15 Oct 2024 |

Invoice Address

University Hospitals Bristol NHSFT  
UHBWFT Creditor Payment Site  
PO Box 3214 Trust HQ  
Marlborough Street  
Bristol  
BS1 9JR

## Delivery Note DVM152799-1

CIP Carriage and Insurance Paid To St Michaels Hospital, UK \* Incoterms® 2020

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| 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  
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Account Number 00906662  
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