

Invoice Address
University Hospitals Of Derby
and Burton NHS FT
Accounts Payable
The House, Queens Hospital
Belvedere Road
DE13 0RB

Delivery Address
Royal Derby Hospital
Neonatal I.C.U, Receipt and
Distribution, Kings Treatment Centre
Uttoxeter Road
Derby
DE22 3NE

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 Karen Henderson
Contact Tel 01332340131
Account 00001390
Customer Reference 640137082
Date 31 Oct 2023
Tracking Number 1Z9W96386878815558
Priced In UK Pounds

Invoice RVM146378-1

CIP Carriage and Insurance Paid To Royal Derby Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM146378-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114007 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Micro Ref. R300P03 Pack of 20	2	55.30	11.06	132.72
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	2	55.30	11.06	132.72
1114005 Tariff 9018199000 CoO United States	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	2	55.30	11.06	132.72
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386878815558		12.00	2.40	14.40

Total Net: 343.80
Total Vat: 68.76
Total: 412.56

Banking details
Bank Barclays Bank PLC
Sort Code 20-78-42
Account Number 00906662
IBAN GB05BUKB20784200906662
BIC BUKGB22
Terms & conditions <https://www.viamed.co.uk/terms>

Terms: Net 30 days from date of invoice.
Full invoice amount to be credited to our account net of all bank charges.
Claims: Please claim non delivery within 7 days of invoice.
Shortages or damage within 3 days of receipt.
Claims after these times cannot be entertained.
Title to goods does not pass until payment in full has been received.