

Invoice Address
Wirral Univ Teaching Hospital NHSFT
Clatterbridge Hospital, WUTHC1 700095
Accounts Payable
Clatterbridge Road
Bebington
CH63 4JY

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 Procurement
Contact Tel 01516785111
Account 00005164
Customer Reference RBLN400186274
Date 20 Nov 2023
Tracking Number 1Z9W96386841335547
Priced In UK Pounds

Invoice RVM146748-1

Delivery Address
Arrowe Park Hospital
WUTHA Goods Distribution Centre
703804, Hospital Stores
Arrowe Park Road
Upton
CH49 5PE

CIP Carriage and Insurance Paid To Arrowe Park Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM146748-1 Contact aqib.majeed@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	1	55.30	11.06	66.36
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	1	55.30	11.06	66.36
1114005 Tariff 9018199000 CoO United States	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	1	55.30	11.06	66.36
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841335547		12.00	2.40	14.40

Total Net: 177.90
Total Vat: 35.58
Total: 213.48

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.