Invoice Address York and Scarborough Teaching Hospital NHSFT, Finance Dept 1 Finance 230108, Centurian Park Tribune Way, Clifton Moor York **YO30 4RY**

Delivery Address York Hospital Main Stores 230284 Wigginton Road York **YO31 8HE**

Supplier Viamed Ltd 15 Station Road Cross Hills 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

Contact Name A Matman Contact Tel 01723385072 00005530 Account Customer Reference RCBN400152752

Date

07 Dec 2023 Tracking Number 1Z9W96386876324136

Priced In **UK Pounds**



Invoice RVM147097-1

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

Delivery Reference DVM147097-1 Contact janine.gill@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005 Tariff 9018199000 CoO United States	EyeMax 2 Neonatal Phototherapy Mask - Regu Ref. R300P01 Pack of 20	ılar 2	55.30	11.06	132.72
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	nie 2	55.30	11.06	132.72
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876324136		10.00	2.00	12.00

Total Net: 231.20 Total Vat: 46.24 Total: 277.44

Banking details Bank Sort Code Account Number IBAN

Barclays Bank PLC 20-78-42 00906662

GB05BUKB20784200906662 BUKBGB22 Terms & conditions https://www.viamed.co.uk/terms

Terms: Net 30 days from date of invoice. 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.