

Invoice Address

Mersey And West Lancashire Teaching Hospital NHS Trust
RBN Payables B225
PO Box 312
Leeds
LS11 1HP

Supplier
Viamed Ltd
15 Station Road
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Company Reg No: 01291765
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Contact Name	Procurement
Contact Tel	01704704758
Account	00003980
Customer Reference	135470697
Date	15 Dec 2023
Tracking Number	1Z9W96386841862521
Priced In	UK Pounds

Invoice RVM147255-1

Delivery Address
Ormskirk District General Hospital
Stores Receipt Centre
Wigan Road
Ormskirk
L39 2AZ

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

Delivery Reference DVM147255-1 Contact emily.morton@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
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:1Z9W96386841862521		10.00	2.00	12.00

Total Net:	120.60
Total Vat:	24.12
Total:	144.72

Banking details

Bank	Barclays Bank PLC
Sort Code	20-78-42
Account Number	00906662
IBAN	GB05BUKB20784200906662
BIC	BUKBGB22
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.