

Invoice Address  
Royal Cornwall Hospitals Trust  
Accounts Payable, Finance Dept  
Carlyon House  
Treliske  
Truro  
Cornwall  
TR1 3LJ

Delivery Address  
Royal Cornwall Hospitals Trust  
Neonatal Unit, C/O Stores Controller  
Treliske  
Gloweth  
Truro  
TR1 3LJ

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: Sophy Howard  
Contact Tel: 07584223548  
Account: 00005140  
Customer Reference: 23021208  
Date: 27 Dec 2023  
Tracking Number: 1Z9W96386842961190  
Priced In: UK Pounds

## Invoice RVM147381-1

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

Delivery Reference DVM147381-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
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:1Z9W96386842961190		8.00	1.60	9.60

Total Net: 63.30  
Total Vat: 12.66  
Total: 75.96

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.