

Invoice Address  
 Torbay and South Devon NHSFT  
 Accounts Payable Department  
 Regent House  
 Regent Close  
 Torquay  
 Devon  
 TQ2 7AN

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 01803653365  
 Account 00005130  
 Customer Reference 1436770  
 Date 02 Jan 2024  
 Tracking Number 1Z9W96386876186170  
 Priced In UK Pounds

## Invoice RVM147466-1

Delivery Address  
 Torbay and South Devon NHSFT  
 Logistics and Goods Inwards Facility  
 Meridian Core Team  
 Unit 7, Torbay Business Park  
 Woodview Road  
 Paignton  
 TQ4 7HP

CIP Carriage and Insurance Paid To Torbay NHST, UK \* Incoterms(r) 2020

Delivery Reference DVM147466-1 Contact kate.griffiths@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:1Z9W96386876186170		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.