**Invoice Address** York and Scarborough Teaching Hospitals NHSFT 1 Finance 230108, Finance Department Tribune House, Centurian Park Way Clfton Moor York

**YO30 4RY** 



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 Company Reg No: 01291765 EORI No: GB287389593000

Supplier Viamed Ltd 15 Station Road

Cross Hills

Contact Name A Matman Contact Tel 01723385072 00005530 Account Customer Reference RCBN400156407 Date 05 Feb 2024

Tracking Number 1Z9W96386878949548

Priced In **UK Pounds** 

**Delivery Address** York Hospital 1 YH Main Stores 230284 Wigginton Road York **YO31 8HE** 

## Invoice RVM148050-1

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

## Delivery Reference DVM148050-1 Contact agib.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
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386878949548		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 00906662 Account Number

IBAN GB05BUKB20784200906662 **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.

Page 1