

Invoice Address  
 University Hospital Birmingham NHSFT  
 BHST Business Group  
 PO Box 16967  
 Edgbaston  
 Birmingham  
 B16 6TT

Supplier  
 Viamed Ltd  
 15 Station Road  
 Cross Hills  
 Keighley, West Yorkshire  
 BD20 7DT, United Kingdom  
 Tel: +44 (0) 1535 634542  
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 Email: info@viamed.co.uk  
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 Company Reg No: 01291765  
 EORI No: GB287389593000



Contact Name Lee-Ann Lamb  
 Contact Tel 01214240310  
 Account 00000490  
 Customer Reference 839074  
 Date 28 Feb 2024  
 Tracking Number 1Z9W96386877151508  
 Priced In UK Pounds

## Invoice RVM148518-1

Delivery Address  
 University Hospital Birmingham NHSFT  
 T50275 Meteor Park Warehouse  
 Unit 3  
 Meteor Park Argyle Street  
 Birmingham  
 B7 5TE

CIP Carriage and Insurance Paid To University Hospital Birmingham, \* Incoterms(r) 2020

Delivery Reference DVM148518-1 Contact kate.griffiths@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	2	55.30	11.06	132.72
1114005 Tariff 9018199000 CoO United States	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	2	55.30	11.06	132.72
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386877151508		10.00	2.00	12.00

Total Net: 231.20  
 Total Vat: 46.24  
 Total: 277.44

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.