

Invoice Address  
Barts Health NHST  
Treasury and Payment Department  
8th Floor  
20 Churchill Place  
London  
E14 5HJ

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 Jennifer Hill  
Contact Tel 02074804688  
Account 00003030  
Customer Reference 40982958  
Date 28 Feb 2024  
Tracking Number 1Z9W96386841282685  
Priced In UK Pounds

## Invoice RVM148522-1

Delivery Address  
Royal London Hospital  
8F\_032 Post Natal  
8th Floor South Tower  
Whitechapel Road  
London  
E1 1FR

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

Delivery Reference DVM148522-1 Contact emily.morton@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	10	55.30	11.06	663.60
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
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841282685		12.00	2.40	14.40

Total Net: 675.60  
Total Vat: 135.12  
Total: 810.72

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.