

Invoice Address  
 Northampton General Hospital NHS Trust  
 Payments Department  
 Cliftonville  
 Northampton  
 NN1 5BD

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: Supplies  
 Contact Tel: 01604545115  
 Account: 00003880  
 Customer Reference: GE073427  
 Date: 27 Mar 2024  
 Tracking Number: 1Z9W96386878899334  
 Priced In: UK Pounds

## Invoice RVM149064-1

Delivery Address  
 Northampton General Hospital  
 Main Stores  
 Cliftonville  
 Northampton  
 NN1 5BD

CIP Carriage and Insurance Paid To Northampton General Hosp, UK \* Incoterms(r) 2020

Delivery Reference DVM149064-1 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	2	55.30	11.06	132.72
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:1Z9W96386878899334		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: BUKGBB22  
 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.