**Invoice Address** Frimley Health NHSFT Accounts Payable, Greenwood Offices Heatherwood Hospital **Brook Avenue** Ascot SL5 7GB

Delivery Address Frimley Park Hospital Receipts and Distribution Portsmouth Road Frimley GU16 7UJ

Supplier Viamed Ltd 15 Station Road Cross Hills

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

Tracking Number

Lisa Agyei Contact Name 03006134157 Contact Tel 00001740 Account AA001324 Customer Reference Date 08 Apr 2024

Priced In **UK Pounds** 

Invoice RVM149215-1

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

## Delivery Reference DVM149215-1 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 - Regu Ref. R300P01 Pack of 20	ılar 2	55.30	11.06	132.72
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841009579		8.00	1.60	9.60

Total Net: 118.60 Total Vat: 23.72 Total: 142.32

1Z9W96386841009579

Banking details Bank

Barclays Bank PLC Sort Code 20-78-42 00906662 Account Number

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.

Page 1