

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

Delivery Address
Good Hope Hospital
T56500 Central Stores
Rectory Road
Sutton Coldfield
B75 7RR

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 Debra Peace
Contact Tel 01214242000
Account 00000517
Customer Reference 844257
Date 19 Apr 2024
Tracking Number 1Z9W96386842476518
Priced In UK Pounds

Invoice RVM149283-1

CIP Carriage and Insurance Paid To Good Hope Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM149283-1 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	1	55.30	11.06	66.36
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842476518		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
Account Number 00906662
IBAN GB05BUKB20784200906662
BIC BUKGB22
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.