Invoice Address Atlas BFW Management Ltd Victoria Hospital Accounts Payable Services, Home 7 Whinney Heys Road Blackpool FY38NR

Delivery Address Victoria Hospital Maternity Whinney Heys Road Blackpool FY3 8NR

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

Purchasing Team Contact Name Contact Tel 01254733883 00000570 Account Customer Reference RXLA400054019 Date 24 Apr 2024

Tracking Number 1Z9W96386876378365 Priced In

UK Pounds

Invoice RVM149570-1

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

Delivery Reference DVM149570-1 Contact agib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0021013 Tariff 90181990-00 CoO United States	Posey Sensor Wraps Model 6554 Box of 12	6	11.80	2.36	84.96
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	ie 1	55.30	11.06	66.36
1114005 Tariff 9018199000 CoO United States	EyeMax 2 Neonatal Phototherapy Mask - Regu Ref. R300P01 Pack of 20	lar 1	55.30	11.06	66.36
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876378365		0.00	0.00	0.00

Total Net: 181.40 Total Vat: 36.28 Total: 217.68

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.

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.

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