Invoice Address Walsall Healthcare NHS Trust Accounts Payable Route 301 Moat Road Walsall **WS2 9PS**

Delivery Address Walsall Healthcare NHS Trust **Distribution Centre** Ida Road

Walsall WS2 9PS 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
EORI No: GB287389593000

Procurement Contact Name Contact Tel 01922656847 00005210 Account Customer Reference 000353813 Date 08 May 2024

1Z9W96386876000324 Tracking Number

Priced In **UK Pounds**

Invoice RVM149794-1

CIP Carriage and Insurance Paid To Walsall Healthcare NHST, UK * Incoterms(r) 2020

Delivery Reference DVM149794-1 Contact

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114007 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Micro Ref. R300P03 Pack of 20	2	55.30	11.06	132.72
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	ie 2	55.30	11.06	132.72
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876000324		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 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.

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