Invoice Address
Royal Free London NHSFT
Accounts Payable, Finance Department
Enfield Civic Centre (10th Floor)
Silver Street
Enfield
EN1 3ES

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	Genesis Order
Contact Tel	02033221935
Account	00000095
Customer Reference	PO157662
Date	02 Jul 2024
Tracking Number	1Z9W96386841616609
Priced In	UK Pounds

Delivery Address
Barnet Hospital
Barnet R and D Central Stores
Genesis Order
Wellhouse Lane
Barnet
EN5 3DJ

Invoice RVM150869-1

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

Delivery Reference DVM150869-1 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 - Regular Ref. R300P01 Pack of 20	1	55.30	11.06	66.36
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841616609		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	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.