**Invoice Address** University Hospitals of Coventry and Warwickshire NHS Trust Finance Department FM Building Clifford Bridge Road Coventry CV2 2DX

Delivery Address UHCW University Hospital Delivery Point 8 Receipt and Distribution Clifford Bridge Road Coventry CV2 2DX

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

Tracking Number

**Dannielle Burgees** Contact Name 02476964450 Contact Tel 00001288 Account Customer Reference 200489076 Date 12 Jul 2024

Priced In **UK Pounds** 

Invoice RVM151065-1

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

## Delivery Reference DVM151065-1 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	lar 5	55.30	11.06	331.80
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386840976277		12.00	2.40	14.40

Total Net: 288.50 Total Vat: 57.70 Total: 346.20

1Z9W96386840976277

Banking details Bank

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

IBAN GB05BUKB20784200906662 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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