

Invoice Address
The Royal Wolverhampton Hospitals
NHS Trust Corporate Services
Centre New Cross Hospital
Wolverhampton Road
Wolverhampton
WV10 0QP

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	Materials Management
Contact Tel	01902307999
Account	00005431
Customer Reference	MM118212
Date	16 Jul 2024
Tracking Number	1Z9W96386842847359
Priced In	UK Pounds

Invoice RVM151124-1

Delivery Address
RWT New Cross Hospital
Receipts and Distribution Centre
Stores Building 2
Wolverhampton Road
Wolverhampton
WV10 0QP

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

Delivery Reference DVM151124-1 Contact kate.griffiths@viamed.co.uk

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	1	55.30	11.06	66.36
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
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:1Z9W96386842847359		10.00	2.00	12.00

Total Net:	175.90
Total Vat:	35.18
Total:	211.08

Banking details
Bank Barclays Bank PLC
Sort Code 20-78-42
Account Number 00906662
IBAN GB05BUKB20784200906662
BIC BUKGBB22
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.