Invoice Address Royal Free London NHSFT Accounts Payable Finance Dept 10th Floor Enfield Civic Centre Silver Street **Enfield** EN13ES

Delivery Address The Royal Free Hospital AT1501 - 6 WEST B R and D Central Stores Fleet Road London

NW3 2QG

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

Lorna Reid Contact Name 02033221935 Contact Tel 00003220 Account Customer Reference RFL560002 Date 23 Jul 2024

Tracking Number 1Z9W96386842941685

Priced In **UK Pounds**

Invoice RVM151236-1

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

Delivery Reference DVM151236-1 Contact sophie.lines@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 2	55.30	11.06	132.72
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842941685		10.00	2.00	12.00

Total Net: 120.60 Total Vat: 24.12 Total: 144.72

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.

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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Banking details