**Invoice Address** Frimley Health NHSFT Accounts Payable Greenwood Offices Heatherwood Hospital **Brook Avenue** Ascot SL5 7GB

Delivery Address Frimley Park Hospital Receipts and Distribution Portsmouth Road Frimley GU16 7UJ

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

Lisa Agyei Contact Name 03006134157 Contact Tel 00001740 Account Customer Reference AA037012 Date 05 Aug 2024

1Z9W96386841816803 Tracking Number

Priced In **UK Pounds** 

## Invoice RVM151453-1

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

## Delivery Reference DVM151453-1 Contact agib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	ie 3	55.30	11.06	199.08
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841816803		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 00906662 Account Number IBAN

BIC BUKBGB22 Terms & conditions https://www.viamed.co.uk/terms

GB05BUKB20784200906662

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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