Invoice Address
Barts Health NHST
Treasury and Payment Department
8th Floor
20 Churchill Place
London
E14 5HJ

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	Jennifer Hill
Contact Tel	02074804641
Account	00003030
Customer Reference	41044711
Date	06 Aug 2024
Tracking Number	1Z9W96386842915007
Priced In	UK Pounds

Delivery Address
Royal London Hospital
8F_032 Post Natal
8th Floor South Tower
Whitechapel Road
London
E1 1FR

Invoice RVM151475-1

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

Delivery Reference DVM151475-1 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	8	55.30	11.06	530.88
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	6	55.30	11.06	398.16
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842915007		12.00	2.40	14.40

Total Net:	786.20
Total Vat:	157.24
Total:	943.44

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.