**Invoice Address** Royal Devon Univ. Healthcare NHST Cash Management Department Gladstone House Gladstone Road Exeter

EX1 2ED

PPUPS1

Delivery Address Royal Devon Univ. Healthcare NHSFT Logistics Goods-In (Neonatal Nursing) Unit A Kestrel Way Sowton Industrial Estate Exeter EX27LA

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

8.00

Procurement Contact Name Contact Tel 01392405406 00001700 Account 30104437 Customer Reference Date 28 Aug 2024

Priced In **UK Pounds** 

Invoice RVM151879-1

CIP Carriage and Insurance Paid To Royal Devon Univ. Healthcare, UK \* Incoterms(r) 2020

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Prer Ref. R300P02 Pack of 20	nie 1	55.30	11.06	66.36

Delivery Reference DVM151879-1 Contact kate.griffiths@viamed.co.uk

**UPS Courier Delivery - Standard** 

AWB:1Z9W96386877327426

Total Net: 63.30 Total Vat: 12.66 Total: 75.96

9.60

1.60

1Z9W96386877327426

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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