

Invoice Address  
Walsall Healthcare NHS Trust  
Accounts Payable  
Route 301  
Moat Road  
Walsall  
WS2 9PS

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 Procurement  
Contact Tel 01922656847  
Account 00005210  
Customer Reference 000453991  
Date 11 Sep 2024  
Tracking Number 1Z9W96386878584094  
Priced In UK Pounds

## Invoice RVM152148-1

Delivery Address  
Walsall Healthcare NHS Trust  
Distribution Centre  
Ida Road  
Walsall  
WS2 9PS

CIP Carriage and Insurance Paid To Walsall Healthcare NHST, UK \* Incoterms(r) 2020

Delivery Reference DVM152148-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
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
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
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386878584094		10.00	2.00	12.00

Total Net: 120.60  
Total Vat: 24.12  
Total: 144.72

Banking details  
Bank Barclays Bank PLC  
Sort Code 20-78-42  
Account Number 00906662  
IBAN GB05BUKB20784200906662  
BIC BUKGB22  
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.