**Invoice Address** Barts Health NHS Trust Treasury and Payments Department 8th Floor 20 Churchill Place London E14 5HJ

**Delivery Address** Newham General Hospital Larch Ward AM1851 Via Main Stores Glen Road Plaistow Greater London E13 8SL

UK

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

**Procurement** Contact Name Contact Tel 02074804641 00003205 Account Customer Reference 41062918 Date 24 Sep 2024

1Z9W96386876110205 Tracking Number

Priced In **UK Pounds** 

## Invoice RVM152380-1

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

## Delivery Reference DVM152380-1 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 4	55.30	11.06	265.44
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876110205		10.00	2.00	12.00

Total Net: 231.20 Total Vat: 46.24 Total: 277.44

Banking details Bank

Barclays Bank PLC Sort Code 20-78-42 00906662 Account Number GB05BUKB20784200906662

IBAN 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.

Page 1