

Invoice Address
East Sussex Healthcare NHST
Accounts Payable Department
St Annes House
729 The Ridge
St Leonards on Sea
TN37 7PT

Delivery Address
Conquest Hospital
Service Centre
General Store
The Ridge
St Leonards on Sea
TN37 7RD

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 Edward Lee
Contact Tel 03001314506
Account 00004831
Customer Reference 254721987
Date 02 Oct 2024
Tracking Number 1Z9W96386878214359
Priced In UK Pounds

Invoice RVM152546-1

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

Delivery Reference DVM152546-1 Contact sophie.lines@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 | 2 | 55.30 | 11.06 | 132.72 |
| 1114006 Tariff 9018199000 CoO U.S.A. | EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20 | 2 | 55.30 | 11.06 | 132.72 |
| PPUPS1 | UPS Courier Delivery - Standard AWB:1Z9W96386878214359 | | 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
Account Number 00906662
IBAN GB05BUKB20784200906662
BIC BUKGBB22
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.