Invoice Address Dudley Group NHS FT Finance Department **Trust Headquarters** Russells Hall Hospital Dudley DY1 2HQ

Delivery Address Russells Hall Hospital The Dudley Group NHS FT Procurement Department Dudley DY12HQ

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

Hansa Patel Contact Name Contact Tel 01384244329 00001465 Account 220048353 Customer Reference Date 06 Nov 2024

Tracking Number 1Z9W96386877694020

Priced In **UK Pounds**

Invoice RVM153224-1

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

Delivery Reference DVM153224-1 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 - Premi Ref. R300P02 Pack of 20	e 2	55.30	11.06	132.72
1114007 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Micro Ref. R300P03 Pack of 20	2	55.30	11.06	132.72
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386877694020		10.00	2.00	12.00

Total Net: 231.20 Total Vat: 46.24 Total: 277.44

Banking details Bank Sort Code

20-78-42 00906662 Account Number 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.

Barclays Bank PLC