

Invoice Address
 University Hospitals of Derby and Burton NHS Foundation Trust
 Accounts Payable
 The House Queens Hospital
 Belvedere Road
 Burton-On-Trent
 DE13 0RB

Supplier
 Viamed Ltd
 15 Station Road
 Cross Hills
 Thryke, 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 Sharron Evans
 Contact Tel 01283511511
 Account 00000790
 Customer Reference 640168312
 Date 15 Nov 2024
 Tracking Number 1Z9W96386841663120
 Priced In UK Pounds

Invoice RVM153417-1

Delivery Address
 Queens Hospital
 Ward 1 (Childrens)
 C/O Receipt and Distribution
 Belvedere Road
 Burton-On-Trent
 DE13 0RB

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

Delivery Reference DVM153417-1 Contact emily.morton@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	1	55.30	11.06	66.36
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841663120		8.00	1.60	9.60

Total Net: 63.30
 Total Vat: 12.66
 Total: 75.96

Banking details
 Bank Barclays Bank PLC
 Sort Code 20-78-42
 Account Number 00906662
 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.