Invoice Address York and Scarborough Teaching Hospitals NHSFT Finance Department Tribune House Centurian Park Tribune Way Clifton Moor York **YO30 4RY**

Delivery Address Scarborough Hospital Central Stores 234213 Scalby Road Scarborough YO12 6QL

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 01723368111 00004490 Account Customer Reference

RCBN400176542 Date 27 Nov 2024

Tracking Number 1Z9W96386876457912 Priced In **UK Pounds**

Invoice RVM153617-1

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

Delivery Reference DVM153617-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005 Tariff 9018199000 CoO United States	EyeMax 2 Neonatal Phototherapy Mask - Regul Ref. R300P01 Pack of 20	lar 1	55.30	11.06	66.36
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876457912		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 00906662 Account Number

IBAN GB05BUKB20784200906662 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.

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