

Invoice Address
University Hospitals North Midlands
C/O ELFS Shared Services
PO Box 4418 Unit 2
Swindon
SN4 4RW

Supplier
Viamed Ltd
15 Station Road
Cross Hills
Keighley, West Yorkshire
BD20 7DT, United Kingdom
Tel: +44 (0) 1535 634542
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Company Reg No: 01291765
EORI No: GB287389593000



Contact Name Kirsty Hulme
Contact Tel 01782715444
Account 00012132
Customer Reference N153921
Date 27 Nov 2024
Tracking Number 1Z9W96386876135724
Priced In UK Pounds

Invoice RVM153618-1

Delivery Address
Royal Stoke Hospital
Supplies and Procurement Warehouse
University Hospitals of North Midlands
578 Newcastle Road
Stoke on Trent
ST4 6QG

CIP Carriage and Insurance Paid To Royal Stoke Uni Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM153618-1 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 - Regular Ref. R300P01 Pack of 20 | 4 | 55.30 | 11.06 | 265.44 |
| 1114006 Tariff 9018199000 CoO U.S.A. | EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20 | 4 | 55.30 | 11.06 | 265.44 |
| PPUPS1 | UPS Courier Delivery - Standard AWB:1Z9W96386876135724 | | 12.00 | 2.40 | 14.40 |

Total Net: 454.40
Total Vat: 90.88
Total: 545.28

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.