Invoice Address Gloucestershire Hospitals Subsidiary Company Limited Victoria Warehouse The Docks Gloucester GL1 2EL

Delivery Address Gloucestershire Royal Hospital Neonatal Unit c/o Distribution Stores Off Horton Road Gloucester GL1 3NN

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

Tracking Number

Procurement Contact Name 03004222665 Contact Tel 00001902 Account Customer Reference GSS959987 Date 10 Dec 2024

Priced In **UK Pounds**

Invoice RVM153834-1

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

Delivery Reference DVM153834-1 Contact

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	ie 2	55.30	11.06	132.72
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876136929		10.00	2.00	12.00

Total Net: 120.60 Total Vat: 24.12 Total: 144.72

1Z9W96386876136929

Banking details

Barclays Bank PLC 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.