Invoice Address Wye Valley NHS Trust Accounts Payable Harold Street Archive Building **Harold Street** Hereford HR1 2QX

Delivery Address Hereford County Hospital Receipt And Distribution SCBU Stock Union Walk Hereford HR1 2ER

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

Michaela Wyatt Contact Name 01432355444 Contact Tel 00002200 Account 000296717 Customer Reference Date 27 Dec 2024 Tracking Number 1Z9W96386842939465

Priced In

UK Pounds

Invoice RVM154104-1

CPT Carriage Paid To Hereford County Hosp, UK * Incoterms(r) 2020

Delivery Reference DVM154104-1 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 - Regu Ref. R300P01 Pack of 20	ılar 2	55.30	11.06	132.72
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	ie 1	55.30	11.06	66.36
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842939465		10.00	2.00	12.00

Total Net: 175.90 Total Vat: 35.18 Total: 211.08

Banking details Bank

Barclays Bank PLC Sort Code 20-78-42 00906662 Account Number GB05BUKB20784200906662

IBAN

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.