Invoice Address Royal Devon Univ. Healthcare NHST Cash Management Department Gladstone House Gladstone Road Exeter EX1 2ED

Viamed Ltd 15 Station Road Cross Hills Cross Hills
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Supplier

Procurement Contact Name Contact Tel 01392405406 00001700 Account Customer Reference 30135189 Date 28 Jan 2025

Tracking Number 1Z9W96386842225726

Priced In **UK Pounds**

Delivery Address Royal Devon and Exeter Hospital (Wonford) Neonatal Unit (CWH) Centre For Child And Womens Health Barrack Road Exeter Devon

EX2 5DW

Invoice RVM154684-1

CIP Carriage and Insurance Paid To Royal Devon Univ. Healthcare, UK * Incoterms(r) 2020

Delivery Reference DVM154684-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	ie 1	55.30	11.06	66.36
1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regu Ref. R300P01 Pack of 20	lar 1	55.30	11.06	66.36
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842225726		10.00	2.00	12.00

Total Net: 120.60 Total Vat: 24.12 Total: 144.72

Banking details Bank

Barclays Bank PLC 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.

Page 1