**Invoice Address** Torbay and South Devon NHSFT Accounts Payable Department Regent House Regent Close Torquay TQ2 7AN

**Delivery Address** Torbay and South Devon NHSFT Logistics and Goods Inwards Facility Unit 7 Torbay Business Park Woodview Road Paignton TQ4 7HP

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 01803653365 00005130 Account Customer Reference 1471128 Date 28 Jan 2025

Tracking Number 1Z9W96386841048554

Priced In **UK Pounds** 

## Invoice RVM154693-1

CIP Carriage and Insurance Paid To Torbay NHST, UK \* Incoterms(r) 2020

## Delivery Reference DVM154693-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
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:1Z9W96386841048554		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 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.

