

Invoice Address  
Chelsea and Westminster Hospital NHSFT  
West Middlesex University Hospital Site  
Finance Department 2nd Floor East Wing  
Twickenham Road  
Isleworth  
TW7 6AF

Supplier  
Viamed Ltd  
15 Station Road  
Cross Hills  
Keighley, West Yorkshire  
BD20 7DT, United Kingdom  
Tel: +44 (0) 1535 634542  
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Email: info@viamed.co.uk  
VAT Reg No: GB287389593  
Company Reg No: 01291765  
EORI No: GB287389593000



|                    |                    |
|--------------------|--------------------|
| Contact Name       | Procurement        |
| Contact Tel        | 02083215326        |
| Account            | 00002824           |
| Customer Reference | CW232320           |
| Date               | 31 Jan 2025        |
| Tracking Number    | 1Z9W96386877959888 |
| Priced In          | UK Pounds          |

## Invoice RVM154757-1

Delivery Address  
Chelsea and Westminster Hospital  
Receipt and Distribution  
Stores  
369 Fulham Road  
London  
SW10 9NH

CIP Carriage and Insurance Paid To Chelsea And Westminster Hosp, UK \* Incoterms(r) 2020

Delivery Reference DVM154757-1 Contact sophie.lines@viamed.co.uk

| Item Reference                             | Description                                                                 | Quantity | Unit  | Unit Vat | Total  |
|--------------------------------------------|-----------------------------------------------------------------------------|----------|-------|----------|--------|
| 1114005<br>Tariff 9018199000<br>CoO Mexico | EyeMax 2 Neonatal Phototherapy Mask - Regular<br>Ref. R300P01<br>Pack of 20 | 3        | 55.30 | 11.06    | 199.08 |
| 1114006<br>Tariff 9018199000<br>CoO Mexico | EyeMax 2 Neonatal Phototherapy Mask - Premie<br>Ref. R300P02<br>Pack of 20  | 3        | 55.30 | 11.06    | 199.08 |
| PPUPS1                                     | UPS Courier Delivery - Standard<br>AWB:1Z9W96386877959888                   |          | 12.00 | 2.40     | 14.40  |

|            |        |
|------------|--------|
| Total Net: | 343.80 |
| Total Vat: | 68.76  |
| Total:     | 412.56 |

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.