Invoice Address South Eastern Health and Social Care Trust **Shared Services Payment Centre** P O Box 1043 Ballymena **BT42 9BS**

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 Company Reg No: 01291765 EORI No: GB287389593000

Supplier Viamed Ltd 15 Station Road

Cross Hills

Carol McGeady Contact Name 02891510124 Contact Tel 00001502 Account DB225259 Customer Reference Date 14 Mar 2025

Tracking Number 1Z9W96386876024826

Priced In **UK Pounds**

Delivery Address Ulster Hospital Main Stores Upper Newtownwards Road Dundonald **Belfast BT16 1RH**

Invoice RVM155603-1

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

Delivery Reference DVM155603-1 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	56.70	11.34	68.04
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	ie 1	56.70	11.34	68.04
PPUPS2	UPS Courier Delivery - Standard AWB:1Z9W96386876024826		8.21	1.64	9.85

Total Net: 121.61 Total Vat: 24.32 Total: 145.93

Banking details Bank Sort Code

Barclays Bank PLC 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