Invoice Address Epsom and St Helier University Hospital **RVR Payables 7545** PO Box 312 Leeds **LS11 1HP**

15 Station Road 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



Contact Name Contact Tel Account Customer Reference

Ann Buckley 02082962000 00001020 249291877 20 Mar 2025

Date Tracking Number

1Z9W96386877763517

Priced In

Supplier Viamed Ltd

Cross Hills

UK Pounds

Delivery Address St Helier Hospital Receipt and Despatch Wrythe Lane Carlshalton

SM5 1AA

Invoice RVM155748-1

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

Delivery Reference DVM155748-1 Contact sophie.lines@viamed.co.uk

| Item Reference | Description | Quantity | Unit | Unit Vat | Total |
|--|---|----------|-------|----------|--------|
| 1114007 Tariff 9018199000 CoO Mexico | EyeMax 2 Neonatal Phototherapy Mask - Micro Ref. R300P03 Pack of 20 | 3 | 56.70 | 11.34 | 204.12 |
| PPUPS1 | UPS Courier Delivery - Standard AWB:1Z9W96386877763517 | | 10.00 | 2.00 | 12.00 |

Total Net: 180.10 Total Vat: 36.02

Total: 216.12

Banking details

Barclays Bank PLC Bank 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.