Invoice Address Great Ormond Street Hospital NHSFT Accounts Payable Department Great Ormond Street London WC1N 3JH

Supplier Viamed Ltd 15 Station Road Cross Hills Cross Hills
Keighley, West Yorkshire
BD20 7DT, United Kingdom
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VAT Reg No: GB287389593
Company Reg No: 01291765
EORI No: GB287389593000



Procurement Contact Name Contact Tel 02074059200 Account Customer Reference

00002960 MM92574 24 Mar 2025

Date Tracking Number

1Z9W96386841225568

Priced In **UK Pounds**

Delivery Address Great Ormond Street Hospital For Children NHSFT **GOSH Trust Stores** 50A Guilford Street London WC1N 1DE

Invoice RVM155803-1

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

Delivery Reference DVM155803-1 Contact agib.majeed@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 2	56.70	11.34	136.08
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	ie 2	56.70	11.34	136.08
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841225568		10.00	2.00	12.00

Total Net: 236.80 Total Vat: 47.36 Total: 284.16

Banking details Bank

Barclays Bank PLC Sort Code 20-78-42 00906662 Account Number GB05BUKB20784200906662

IBAN 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.

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