

Invoice Address
Warrington And Halton NHSFT
RWW Payables B205
PO Box 312
Leeds
LS11 1HP

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



Contact Name Andrew Cox
Contact Tel 01925662635
Account 00005240
Customer Reference 133622366
Date 11 Apr 2025
Tracking Number 1Z9W96386878470984
Priced In UK Pounds

Invoice RVM155903-1

Delivery Address
Warrington Hospital
Goods In Bay
Lovely Lane
Warrington
WA5 1QG

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

Delivery Reference DVM155903-1 Contact kate.griffiths@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 | 1 | 56.70 | 11.34 | 68.04 |
| 1114006 Tariff 9018199000 CoO Mexico | EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20 | 3 | 56.70 | 11.34 | 204.12 |
| 1114005 Tariff 9018199000 CoO Mexico | EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20 | 2 | 56.70 | 11.34 | 136.08 |
| PPUPS1 | UPS Courier Delivery - Standard AWB:1Z9W96386878470984 | | 12.00 | 2.40 | 14.40 |

Total Net: 352.20
Total Vat: 70.44
Total: 422.64

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.