Invoice Address
SWBH BU Sandwell and West
Birmingham Hospitals NHST
SF Office 14 Trinity House
Lyndon
West Bromwich
B71 4HJ

Supplier
Viamed Ltd
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	Doal Sukhpreet
Contact Tel	01215543801
Account	00000480
Customer Reference	GENPO002763
Date	02 Apr 2025
Tracking Number	1Z9W96386878628911
Priced In	UK Pounds

Delivery Address
Midland Metropolitan University
Hospital R And D
London Street Off Grove Lane
Smethwick
Sandwell
B66 2QT

Invoice RVM156003-1

CIP Carriage and Insurance Paid To Midland Metro Uni Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM156003-1 Contact aqib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	1	56.70	11.34	68.04
1114007 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Micro Ref. R300P03 Pack of 20	1	56.70	11.34	68.04
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386878628911		10.00	2.00	12.00

Total Net:	123.40
Total Vat:	24.68
Total:	148.08

Banking details

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