Invoice Address East Lancs Hospital NHS Trust C/O ELFS Business Services Viscount House Arkwright Court Commercial Road Darwen BB3 0FG

Delivery Address Burnley General Hospital Receipts Department Briercliffe Road Burnley BB10 2PQ

Supplier Viamed Ltd 15 Station Road Cross Hills 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

Tracking Number

1Z9W96386877678753

Total

Company Reg No: 01291765 EORI No: GB287389593000 Rehana Sadiq Contact Name 01282425071 Contact Tel 00000780 Account **Customer Reference** ETJ33861 Date 03 Apr 2025

Priced In **UK Pounds**

Invoice RVM156045-1

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

Delivery Reference DVM156045-1 Contact kate.griffiths@viamed.co.uk Item Reference Description Quantity Unit Unit Vat EveMax 2 Neonatal Phototherapy Mask - Regular 11.34 3 56.70

1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	3	56.70	11.34	204.12
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	3	56.70	11.34	204.12
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:1Z9W96386877678753		12.00	2.40	14.40

Total Net: 522.30 Total Vat: 104.46 Total: 626.76

Banking details Bank Sort Code

20-78-42 00906662 Account Number IBAN GB05BUKB20784200906662 **BUKBGB22** Terms & conditions https://www.viamed.co.uk/terms

Barclays Bank PLC

Terms: Net 30 days from date of invoice.

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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