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

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

Supplier Viamed Ltd 15 Station Road

Cross Hills

**Andrew Cox** Contact Name Contact Tel 01925662635 00005240 Account Customer Reference 133622776 Date 11 Apr 2025

Tracking Number 1Z9W96386840494350

Priced In **UK Pounds** 

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

## Invoice RVM156047-1

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

## Delivery Reference DVM156047-1 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	2	56.70	11.34	136.08
1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regu Ref. R300P01 Pack of 20	lar 1	56.70	11.34	68.04
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	ie 1	56.70	11.34	68.04
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386840494350		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 IBAN

BIC BUKBGB22
Terms & conditions https://www.viamed.co.uk/terms

GB05BUKB20784200906662

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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