

Invoice Address
 Sandwell and West Birmingham
 Hospitals NHS Trust SWBH BU
 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
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 Company Reg No: 01291765
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Contact Name Sukhpreet Doal
 Contact Tel 01215531831
 Account CID31628
 Customer Reference GENPO002851
 Date 04 Apr 2025
 Tracking Number 1Z9W96386840520900
 Priced In UK Pounds

Invoice RVM156064-1

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

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

Delivery Reference DVM156064-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	1	56.70	11.34	68.04
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:1Z9W96386840520900		10.00	2.00	12.00

Total Net: 180.10
 Total Vat: 36.02
 Total: 216.12

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.