Invoice Address University Hosp Of Derby and Burton NHS FT Accounts Payable The House Queens Hospital Belvedere Road Burton-on-Trent **DE13 0RB**

Delivery Address Royal Derby Hospital Neonatal I.C.U Receipt and Distribution Kings Treatment Centre Uttoxeter Road Derby DE22 3NE

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
Company Reg No: 01291765 Company Reg No: 01291765 EORI No: GB287389593000

Tracking Number

Justine Harvey Contact Name 01332340131 Contact Tel 00001390 Account Customer Reference 640179252 Date 08 Apr 2025

Priced In **UK Pounds**

Invoice RVM156116-1

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

Delivery Reference DVM156116-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
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:1Z9W96386877582954		8.00	1.60	9.60

Total Net: 64.70 Total Vat: 12.94 Total: 77.64

1Z9W96386877582954

Banking details Bank

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

IBAN GB05BUKB20784200906662 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.