Invoice Address North Bristol NHS Trust **RVJ Payables 6345** PO Box 312 Leeds **LS11 1HP**

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

BWPC Orders Contact Name 01173429411 Contact Tel 00000740 Account Customer Reference EP61281 Date 16 May 2025

Tracking Number 1Z9W96386841416469

Priced In **UK Pounds**

Delivery Address Southmead Hospital NICU Via Rec and Distribution Dorian Way Westbury Ón Trym Bristol **BS10 5NB**

Invoice RVM156808-1

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

Delivery Reference DVM156808-1 Contact agib.majeed@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 6 | 56.70 | 11.34 | 408.24 |
| PPUPS1 | UPS Courier Delivery - Standard AWB:1Z9W96386841416469 | | 12.00 | 2.40 | 14.40 |

Total Net: 352.20 Total Vat: 70.44 Total: 422.64

Banking details Bank

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

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.

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