Invoice Address University Hospitals Morecambe Bay Finance Department PO Box 98 Moor Lane Mills Lancaster LA1 4GG

Delivery Address Royal Lancaster Infirmary Receipt and Distribution Ashton Road Lancaster LA1 4RP

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
EORI No: GB287389593000

Tracking Number

John Gosling Contact Name 01524516464 Contact Tel 00002470 Account Customer Reference MBH53632 Date 20 May 2025

Priced In **UK Pounds**

Invoice RVM156858-1

CIP Carriage and Insurance Paid To Royal Lancaster Infirmary, UK * Incoterms(r) 2020

Delivery Reference DVM156858-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regul Ref. R300P01 Pack of 20	lar 3	56.70	11.34	204.12
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386877595646		10.00	2.00	12.00

Total Net: 180.10 Total Vat: 36.02

1Z9W96386877595646

Total: 216.12

Banking details

Barclays Bank PLC Bank 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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