

Invoice Address  
Aneurin Bevan University Health Board  
342049 Accounts Payable OCR ABHB  
PO Box 114  
Pontypool  
NP4 4DJ

Delivery Address  
Grange University Hospital  
324551 R and D Stores  
Llanfrechfa Grange  
Cwmbran  
NP44 8YN

Supplier  
Viamed Ltd  
15 Station Road  
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



Contact Name	Procurement
Contact Tel	01633493100
Account	CID19789
Customer Reference	34183550
Date	17 Jun 2025
Tracking Number	1Z9W96386877844037
Priced In	UK Pounds

## Invoice RVM157337-1

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

Delivery Reference DVM157337-1 Contact emily.morton@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	2	56.70	11.34	136.08
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:1Z9W96386877844037		12.00	2.40	14.40

Total Net:	182.10
Total Vat:	36.42
Total:	218.52

Banking details  
Bank Barclays Bank PLC  
Sort Code 20-78-42  
Account Number 00906662  
IBAN GB05BUKB20784200906662  
BIC BUKGBB22  
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.