**Invoice Address** Manchester University NHS Foundation Trust Trafford General Hospital Accounts Payable - Central Invoices Finance and Proc Business Unit Davyhulme M41 5SL

**Delivery Address** Wythenshawe Hospital Maternity Services Southmoor Road Wythenshawe Manchester M23 9LT

Supplier Viamed Ltd 15 Station Road Cross Hills

Cross Hills
Keighley, West Yorkshire
BD20 7DT, United Kingdom
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Email: info@viamed.co.uk
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Company Reg No: 01291765 EORI No: GB287389593000

Contact Name Jeanette Armstrong Contact Tel 01612912019 00003640 Account Customer Reference 000524802 Date 31 Jul 2025

Tracking Number 1Z9W96386840736062

Priced In **UK Pounds** 

## Invoice RVM158197-1

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

## Delivery Reference DVM158197-1 Contact emily.morton@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regu Ref. R300P01 Pack of 20	ılar 4	56.70	11.34	272.16
PPUPS1	UPS Courier Delivery - Standard 1Z9W96386840736062		10.00	2.00	12.00

Total Net: 236.80 Total Vat: 47.36

Total: 284.16

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.

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