Invoice Address West Herts Teaching Hospitals NHS Trust Finance Department Maple House Unit 11 **Thomas Sawyer Way** Watford **WD18 0GS**

Delivery Address Watford General Hospital Receipt and Delivery Point - WGH Vicarage Road Watford **WD18 0HB**

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

Estefania Da Silva Fonseca Contact Name Contact Tel 01923244366

00005260 Account Customer Reference 990139056 Date 11 Aug 2025

1Z9W96386840074849 Tracking Number

Priced In **UK Pounds**

Invoice RVM158364-1

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

Delivery Reference DVM158364-1 Contact kate.griffiths@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	lar 4	56.70	11.34	272.16
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386840074849		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.

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.

