**Invoice Address Dudley Group NHS FT** Finance Department **Trust Headquarters** Russells Hall Hospital Dudley DY1 2HQ

Delivery Address Russells Hall Hospital Procurement Department Pensnett Road Dudley DY1 2HQ

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

Sandra Masih Contact Name Contact Tel 01384244614 00001465 Account 170008427 Customer Reference Date 29 Aug 2025

Tracking Number Priced In **UK Pounds** 

## Invoice RVM158714-1

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

## Delivery Reference DVM158714-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regul Ref. R300P01 Pack of 20	lar 1	56.70	11.34	68.04
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841839182		8.00	1.60	9.60

**Total Net:** 64.70 Total Vat: 12.94 Total: 77.64

1Z9W96386841839182

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.