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 NB Access Via Vicarage Road Only Vicarage Road Watford **WD19 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

Chris Bradley Contact Name 01707356168 Contact Tel 00005260 Account **Customer Reference** 440188210 Date 11 Sep 2025

Tracking Number 1Z9W96386876372754

Priced In **UK Pounds**

Invoice RVM158949-1

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

Delivery Reference DVM158949-1 Contact agib.majeed@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
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	ie 4	56.70	11.34	272.16
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876372754		12.00	2.40	14.40

Total Net: 465.60 Total Vat: 93.12 Total: 558.72

Banking details Bank Sort Code

IBAN

Barclays Bank PLC 20-78-42 00906662 Account Number 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.

