

Invoice Address  
Barts Health NHST  
Treasury and Payment Department  
8th Floor  
20 Churchill Place  
London  
E14 5HJ

Delivery Address  
Royal London Hospital  
8F\_032 Post Natal  
8th Floor South Tower  
Whitechapel Road  
London  
E1 1FR

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 Maureen Watson  
Contact Tel 02074804641  
Account 00003030  
Customer Reference 41198047  
Date 03 Oct 2025  
Tracking Number 1Z9W96386877608140  
Priced In UK Pounds

## Invoice RVM159342-1

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

Delivery Reference DVM159342-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	8	56.70	11.34	544.32
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	5	56.70	11.34	340.20
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386877608140		12.00	2.40	14.40

Total Net: 749.10  
Total Vat: 149.82  
Total: 898.92

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.