Invoice Address Frimley Health NHSFT Accounts Payable Greenwood Offices Heatherwood Hospital **Brook Avenue** Ascot SL5 7GB

Delivery Address Frimley Park Hospital Receipts and Distribution Portsmouth Road Frimley GU16 7UJ

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

Tina Clark Contact Name 01344877482 Contact Tel 00001740 Account Customer Reference P803123 Date 10 Nov 2025

Tracking Number 1Z9W96386840380062

Priced In **UK Pounds**

Invoice RVM160057-1

CIP Carriage and Insurance Paid To Frimley Park Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM160057-1 Contact emily.morton@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	ie 2	56.70	11.34	136.08
1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regu Ref. R300P01 Pack of 20	lar 2	56.70	11.34	136.08
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386840380062		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

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.

