**Invoice Address** Torbay and South Devon NHSFT Accounts Payable Department Regent House Regent Close Torquay TQ2 7AN

**Delivery Address** Torbay and South Devon NHSFT Logistics and Goods Inwards Facility Unit 7 Torbay Business Park Woodview Road Paignton TQ4 7HP

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

**Procurement** Contact Name Contact Tel 01803653365 00005130 Account Customer Reference 1497195 Date 20 Nov 2025

Tracking Number 1Z9W96386878011489

Priced In **UK Pounds** 

Invoice RVM160203-1

CIP Carriage and Insurance Paid To Torbay NHST, UK \* Incoterms(r) 2020

## Delivery Reference DVM160203-1 Contact sophie.lines@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 1	56.70	11.34	68.04
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386878011489		8.00	1.60	9.60

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

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.

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.

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