**Invoice Address** Gloucestershire Managed Services Gloucestershire Shared Services Victoria Warehouse The Docks Gloucester GL1 2EL

**Delivery Address** Gloucestershire Royal Hospital Maternity Ward C/O Distribution Stores Off Horton Road Gloucester

GL1 3NN

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 03004222665 Contact Tel 00001902 Account GSS985447 Customer Reference Date 27 Nov 2025

Tracking Number 1Z9W96386876894146

Priced In **UK Pounds** 

## Invoice RVM160390-1

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

## Delivery Reference DVM160390-1 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 2	56.70	11.34	136.08
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876894146		10.00	2.00	12.00

Total Net: 123.40 Total Vat: 24.68 Total: 148.08

Banking details Bank

Barclays Bank PLC Sort Code 20-78-42 00906662 Account Number IBAN

BUKBGB22 Terms & conditions https://www.viamed.co.uk/terms

GB05BUKB20784200906662

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.

