



Invoice Address

York and Scarborough Teaching Hospitals NHSFT
1 Finance 230108 Finance Department
Tribune House Centurian Park
Tribune Way Clifton Moor
York
YO30 4RY

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	Purchasing
Contact Tel	01723385072
Account	00005530
Customer Reference	RCBN400201641
Date	08 Dec 2025
Tracking Number	1Z9W96386840426405
Priced In	UK Pounds

Invoice RVM160554-1

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

Delivery Reference DVM160554-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	1	56.70	11.34	68.04
PPUPPS1	UPS Courier Delivery - Standard AWB:1Z9W96386840426405	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
Account Number 00906662
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.