

**Invoice Address**

United Lincolnshire Hospitals NHS Trust
Lincoln County Hospital
Accounts Payable
Greetwell Road
Lincoln
LN2 5QY

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 01205364801

Account 00000600

Customer Reference U050976

Date 15 Dec 2025

Tracking Number 1Z9W96386842053386

Priced In UK Pounds

Delivery Address
Pilgrim Hospital
Central Stores
Sibsey Road
Boston
PE21 9QS

Invoice RVM160709-1

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

Delivery Reference DVM160709-1 Contact aqib.majeed@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	1	56.70	11.34	68.04
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	1	56.70	11.34	68.04
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842053386		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
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 full has been received.