

Invoice Address
UCLH NHS Foundation Trust
Accounts Payable
London
NW1 2PG

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 **Rejaul Hussain**
Contact Tel **02034477771**
Account **00003420**
Customer Reference **RRVN400411487**
Date **19 Dec 2025**
Vat Number **GB 524 3711 68**
Tracking Number **1z9w96386876752709**
Priced In **UK Pounds**
Invoice RVM160814-1

Delivery Address
University College Hospital
Loading Bay
Beaumont Place
Off Tottenham Court Road
London
NW1 2BU

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

Delivery Reference **DVM160814-1** Contact kate.griffiths@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	4	56.70	11.34	272.16
PPUPS1	UPS Courier Delivery - Standard AWB:1z9w96386876752709	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**
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.