

**Invoice Address**

Royal Cornwall Hospitals Trust
Accounts Payable Finance Dept
Carlyon House
Treliske
Truro
TR1 3LJ

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 Ryan Hicks
Contact Tel 01872250000
Account 00005140
Customer Reference 25520212
Date 02 Jan 2026
Tracking Number 1Z9W96386842039231
Priced In UK Pounds

Delivery Address
Royal Cornwall Hospitals Trust
Neonatal Unit
C/O Stores Controller
Treliske
Gloweth
TR1 3LJ

Invoice RVM160928-1

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

Delivery Reference DVM160928-1 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
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842039231	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 full has been received.