

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

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

## 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 BUKGB22  
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.