

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 01904631313  
 Account 00005530  
 Customer Reference RCBN400204674  
 Date 30 Jan 2026  
 Tracking Number 1Z9W96386841759376  
 Priced In UK Pounds

**Invoice RVM161537-1**

Delivery Address  
 York Hospital  
 1 YH Main Stores 230284  
 Wigginton Road  
 York  
 YO31 8HE

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

Delivery Reference DVM161537-1 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	2	56.70	11.34	136.08
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:1Z9W96386841759376		10.00	2.00	12.00

Total Net: 180.10  
 Total Vat: 36.02  
 Total: 216.12

Banking details  
 Bank Barclays Bank PLC  
 Sort Code 20-78-42  
 Account Number 00906662  
 IBAN GB05BUKB20784200906662  
 BIC BUKGBB22  
 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.