

Invoice Address  
Liverpool Womens NHSFT  
Liverpool Womens Hospital  
Finance Department  
Crown Street  
Liverpool  
L8 7SS

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 Procurement  
Contact Tel 01517089988  
Account 00002662  
Customer Reference REPN400034187  
Date 27 Feb 2026  
Tracking Number 1Z9W96386842633599  
Priced In UK Pounds

## Invoice RVM162114-1

Delivery Address  
Liverpool Womens NHSFT  
Receipting and Distribution  
Loading Bay  
Crown Street  
Liverpool  
L8 7SS

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

Delivery Reference DVM162114-1 Contact sophie.lines@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	3	56.70	11.34	204.12
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842633599		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 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.