

Invoice Address
 Northampton General Hospital NHS Trust
 Payments Department
 Cliftonville
 Northampton
 NN1 5BD

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: Supplies
 Contact Tel: 01604545115
 Account: 00003880
 Customer Reference: GE098955
 Date: 10 Mar 2026
 Tracking Number: 1Z9W96386842192486
 Priced In: UK Pounds

Invoice RVM162300-1

Delivery Address
 Northampton General Hospital
 Main Stores
 Cliftonville
 Northampton
 NN1 5BD

CIP Carriage and Insurance Paid To Northampton General Hosp, UK * Incoterms 2020

Delivery Reference DVM162300-1 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	0.00	0.00	0.00
1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	2	0.00	0.00	0.00
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842192486		0.00	0.00	0.00

Total Net: 0.00
 Total Vat: 0.00
 Total: 0.00

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.