

Invoice Address
Hampshire Hospitals NHSFT
RN5 Payables F025
PO Box 312
Leeds
LS11 1HP

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 01256473202
Account 00000333
Customer Reference 260539145
Date 15 Apr 2026
Tracking Number 1Z9W96386878674184
Priced In UK Pounds

Invoice RVM162953-1

Delivery Address
Basingstoke and North Hampshire
Hospital
Main Stores
Aldermaston Road
Basingstoke
RG24 9NA

CIP Carriage and Insurance Paid To Basingstoke Hospital, UK * Incoterms 2020

Delivery Reference DVM162953-1 Contact emily.morton@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:1Z9W96386878674184		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.