

Invoice Address
 United Lincolnshire Hospitals NHST
 Accounts Payable (Ref: ULHT)
 Lincoln County Hospital
 Greetwell Road
 Lincoln
 LN2 5QY

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 Dept
 Contact Tel 01522512512
 Account 00002609
 Customer Reference U056270
 Date 11 May 2026
 Tracking Number 1Z9W96386876742505
 Priced In UK Pounds

Invoice RVM163454-1

Delivery Address
 Lincoln County Hospital
 Central Goods Receipt Point
 Greetwell Road
 Lincoln
 LN2 5QY

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

Delivery Reference DVM163454-1 Contact kate.griffiths@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	58.90	11.78	70.68
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	1	58.90	11.78	70.68
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876742505		10.00	2.00	12.00

Total Net: 127.80
 Total Vat: 25.56
 Total: 153.36

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.