

Invoice Address
 West Herts Teaching Hospitals
 NHS Trust Finance Department
 Maple House Unit 11
 Thomas Sawyer Way
 Watford
 WD18 0GS

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 Amanda Thomas
 Contact Tel 01923244366
 Account 00005260
 Customer Reference 990142249
 Date 14 May 2026
 Tracking Number 1Z9W96386842753629
 Priced In UK Pounds

Invoice RVM163548-1

Delivery Address
 Watford General Hospital
 Receipt and Delivery Point - WGH
 NB Access Via Vicarage Road Only
 Vicarage Road
 Watford
 WD19 0HB

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

Delivery Reference DVM163548-1 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	58.90	11.78	212.04
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	3	58.90	11.78	212.04
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842753629		12.00	2.40	14.40

Total Net: 365.40
 Total Vat: 73.08
 Total: 438.48

Banking details
 Bank Barclays Bank PLC
 Sort Code 20-78-42
 Account Number 00906662
 IBAN GB05BUKB20784200906662
 BIC BUKBGB22
 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.