

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 Procurement  
 Contact Tel 01707356169  
 Account 00005260  
 Customer Reference 990142354  
 Date 28 May 2026  
 Tracking Number 1Z9W96386877481134  
 Priced In UK Pounds

## Invoice RVM163750-1

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 DVM163750-1 Contact aqib.majeed@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	4	58.90	11.78	282.72
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386877481134		10.00	2.00	12.00

Total Net: 245.60  
 Total Vat: 49.12  
 Total: 294.72

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.