

Invoice Address
 Hull University Teaching Hospitals
 C/O ELFS Business Services
 Viscount House Arkwright Court
 Commercial Road
 Darwen
 BB3 0FG

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 Department
 Contact Tel: 01482608783
 Account: 00002265
 Customer Reference: RWA286030
 Date: 02 Jun 2026
 Tracking Number: 1Z9W96386876067325
 Priced In: UK Pounds

Invoice RVM163852-1

Delivery Address
 Hull Royal Infirmary
 HUTH Goods Inward
 Fountain Street
 Anlaby Road
 Hull
 HU3 2JZ

CIP Carriage and Insurance Paid To Hull Royal Infirmary, UK * Incoterms 2020

Delivery Reference DVM163852-1 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	1	58.90	11.78	70.68
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876067325		8.00	1.60	9.60

Total Net: 66.90
 Total Vat: 13.38
 Total: 80.28

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.