

Invoice Address
 The Royal Wolverhampton NHS Trust
 RL4 Payables G175
 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: Serena Credali
 Contact Tel: 01902307999
 Account: 00005430
 Customer Reference: 365026633
 Date: 03 Jun 2026
 Tracking Number: 1Z9W96386878606864
 Priced In: UK Pounds

Invoice RVM163903-1

Delivery Address
 New Cross Hospital
 Building 2 RWT
 Wolverhampton Road
 Wolverhampton
 WV10 0QP

CIP Carriage and Insurance Paid To RWT New Cross Hospital, UK * Incoterms 2020

Delivery Reference DVM163903-1 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:1Z9W96386878606864		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.