

Invoice Address  
University Hospitals Bristol and Weston NHSFT  
PO Box 3214  
Trust HQ  
Marlborough Street  
Bristol  
BS1 9JR

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 Bwpc Orders  
Contact Tel 01173425324  
Account 00000691  
Customer Reference EP187858  
Date 04 Jun 2026  
Tracking Number 1Z9W96386877387728  
Priced In UK Pounds

## Invoice RVM163918-1

Delivery Address  
St Michaels Hospital  
Special Care Baby Unit  
Level D  
Southwell Street  
Bristol  
BS2 8EG

CIP Carriage and Insurance Paid To St Michaels Hospital, UK \* Incoterms 2020

Delivery Reference DVM163918-1 Contact [aqib.majeed@viamed.co.uk](mailto: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	3	58.90	11.78	212.04
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386877387728		10.00	2.00	12.00

Total Net: 186.70  
Total Vat: 37.34  
Total: 224.04

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.