

Invoice Address
Worcestershire Acute Hospitals NHST
RWP Payables 6485
PO Box 312
Leeds
LS11 1HP

Supplier
Viamed Ltd
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Cross Hills
Keighley, West Yorkshire
BD20 7DT, United Kingdom
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Company Reg No: 01291765
EORI No: GB287389593000



Contact Name Haley Cook
Contact Tel 01905763333
Account 00005445
Customer Reference 305698362
Date 19 Jun 2026
Tracking Number 1Z9W96386876069323
Priced In UK Pounds

Invoice RVM164246-1

Delivery Address
Worcestershire Royal Hospital
Loading Bay
Charles Hastings Way
Worcester
WR5 1DD

CIP Carriage and Insurance Paid To Worcestershire Royal Hosp, UK * Incoterms 2020

Delivery Reference DVM164246-1 Contact sophie.lines@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	2	58.90	11.78	141.36
1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	2	58.90	11.78	141.36
PPUPS1	UPS Courier Delivery - Standard AWB;1Z9W96386876069323		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.