

Invoice Address
Aneurin Bevan University Health Board
342049 Accounts Payable OCR ABHB
PO Box 114
Pontypool
NP4 4DJ

Delivery Address
Grange University Hospital
324551 R and D Stores
Llanfrechfa Grange
Cwmbran
NP44 8YN

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	01633493100
Account	CID19789
Customer Reference	34339169
Date	23 Jun 2026
Tracking Number	1Z9W96386876564476
Priced In	UK Pounds

Invoice RVM164293-1

CIP Carriage and Insurance Paid To Grange University Hospital, UK * Incoterms 2020

Delivery Reference DVM164293-1 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	2	58.90	11.78	141.36
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	2	58.90	11.78	141.36
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386876564476		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.