Invoice Address
West Herts Teaching Hospitals
NHS Trust Finance Department
Maple House Unit 11
Thomas Sawyer Way
Watford
WD18 0GS

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	Amanda Thomas
Contact Tel	01923244366
Account	00005260
Customer Reference	990142994
Date	23 Jul 2026
Tracking Number	1Z9W96386842648038
Priced In	UK Pounds

Delivery Address
Watford General Hospital
Receipt and Delivery Point - WGH
NB Access Via Vicarage Road Only
Vicarage Road
Watford
WD19 0HB

Invoice RVM164873-1

CIP Carriage and Insurance Paid To Watford General Hospital, UK * Incoterms 2020

Delivery Reference DVM164873-1 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	6	58.90	11.78	424.08
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	3	58.90	11.78	212.04
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842648038		12.00	2.40	14.40

Total Net:	542.10
Total Vat:	108.42
Total:	650.52

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.