Invoice Address Medway NHSFT Finance Dept, Residence 13A Medway Maritime Hospital Windmill Road Gillingham ME7 5NY

Delivery Address Medway Maritime Hospital Hospital Main Store Windmill Road Gillingham Kent ME7 5NY

Supplier Viamed Ltd 15 Station Road Cross Hills

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 Company Reg No: 01291765 Eori No: GB287389593000

Procurement Department Contact Name Contact Tel 01634833700

Customer Reference Date

Account

13 Nov 2023 Tracking Number 1Z9W96386842894030

Priced In **UK Pounds**

00001770

240012166



Invoice RVM146643-1

CIP Carriage and Insurance Paid To Medway Maritime Hosp, UK * Incoterms(r) 2020

Delivery Reference DVM146643-1 Contact emily.morton@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	ie 3	55.30	11.06	199.08
1114005 Tariff 9018199000 CoO United States	EyeMax 2 Neonatal Phototherapy Mask - Regu Ref. R300P01 Pack of 20	lar 3	55.30	11.06	199.08
PPUPS1	UPS Courier Delivery - Standard 1Z9W96386842894030		12.00	2.40	14.40

Total Net: 343.80 Total Vat: 68.76 Total: 412.56

Banking details Bank Sort Code

Barclays Bank PLC 20-78-42 00906662 Account Number IBAN

GB05BUKB20784200906662 BIC BUKBGB22 Terms & conditions https://www.viamed.co.uk/terms

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.

Terms: Net 30 days from date of invoice.

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