**Invoice Address** Hull University Teaching Hospitals C/O ELFS Business Services Viscount House Arkwright Court Commercial Road Darwen BB3 0FG

**Delivery Address** Hull Royal Infirmary **HUTH Goods Inward** Fountain Street Anlaby Road Hull HU3 2JZ

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

Supplies Department Contact Name 01482608783 Contact Tel 00002265 Account Customer Reference RWA272163 Date 12 Nov 2025

Tracking Number 1Z9W96386878671696

Priced In **UK Pounds** 

## Invoice RVM160099-1

CIP Carriage and Insurance Paid To Hull Royal Infirmary, UK \* Incoterms(r) 2020

## Delivery Reference DVM160099-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114007 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Micro Ref. R300P03 Pack of 20	2	56.70	11.34	136.08
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386878671696		10.00	2.00	12.00

Total Net: 123.40 Total Vat: 24.68 Total: 148.08

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Banking details Bank

Barclays Bank PLC Sort Code 20-78-42 00906662 Account Number

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

Terms: Net 30 days from date of invoice.

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.