

Invoice Address
 University Hospitals Birmingham
 BHST Business Group
 PO Box 16967
 Edgbaston
 Birmingham
 B16 6TT

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 Stacey Lowry
 Contact Tel 01214247775
 Account 00000517
 Customer Reference 926625
 Date 03 Mar 2026
 Tracking Number 1Z9W96386878022191
 Priced In UK Pounds

Invoice RVM162174-1

Delivery Address
 Good Hope Hospital
 T56500 Central Stores
 Rectory Road
 Sutton Coldfield
 B75 7RR

CIP Carriage and Insurance Paid To Good Hope Hospital, UK * Incoterms 2020

Delivery Reference DVM162174-1 Contact kate.griffiths@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	1	56.70	11.34	68.04
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386878022191		8.00	1.60	9.60

Total Net: 64.70
 Total Vat: 12.94
 Total: 77.64

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.