

Invoice Address  
UCLH NHS Foundation Trust  
Accounts Payable  
London  
NW1 2PG

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 Bosteyo Hassan  
Contact Tel 02034477771  
Account 00003420  
Customer Reference RRVN400428459  
Date 25 Mar 2026  
Vat Number GB 524 3711 68  
Tracking Number 1Z9W96386878732254  
Priced In UK Pounds  
**Invoice RVM162594-1**

Delivery Address  
University College Hospital  
Loading Bay  
Beaumont Place  
Off Tottenham Court Road  
London  
NW1 2BU

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

Delivery Reference DVM162594-1 Contact kate.griffiths@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	5	56.70	11.34	340.20
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386878732254		12.00	2.40	14.40

Total Net: 295.50  
Total Vat: 59.10  
Total: 354.60

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.