

Invoice Address
 South Eastern Health and Social Care Trust
 Shared Services Payment Centre
 P O Box 1043
 Ballymena
 BT42 9BS

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 Adam McClelland
 Contact Tel 02891510124
 Account 00001502
 Customer Reference DB241408
 Date 01 Apr 2026
 Tracking Number 1Z9W96386878483416
 Priced In UK Pounds

Invoice RVM162711-1

Delivery Address
 Ulster Hospital
 Main Stores
 Upper Newtownwards Road
 Dundonald
 Belfast
 BT16 1RH

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

Delivery Reference DVM162711-1 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	1	56.70	11.34	68.04
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	1	56.70	11.34	68.04
PPUPS2	UPS Courier Delivery - Standard 26 x 24 x 6 cm 0.3kg AWB:1Z9W96386878483416		9.00	1.80	10.80

Total Net: 122.40
 Total Vat: 24.48
 Total: 146.88

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.