

Invoice Address  
Salisbury NHS Foundation Trust  
RNZ Payables F935  
PO Box 312  
Leeds  
LS11 1HP

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 Joshil James  
Contact Tel 01722336262  
Account 00004470  
Customer Reference 351124508  
Date 06 Jun 2025  
Tracking Number 1Z9W96386842149050  
Priced In UK Pounds

## Invoice RVM157099-1

Delivery Address  
Salisbury District Hospital  
Receipts and Distribution Area  
Odstock Road  
Salisbury  
SP2 8BJ

CIP Carriage and Insurance Paid To Salisbury District Hospital, UK \* Incoterms(r) 2020

Delivery Reference DVM157099-1 Contact cathy.green@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1480000 Tariff 9018199000 CoO United Kingdom	V1000 Foetal Heart Simulator Service and Functional Check	1	65.00	13.00	78.00
	S/N:GE71743923 SRS69134 SRN37884				
1430309 Tariff 9031808000 CoO United Kingdom PPUPS1	V1000 Transducer Interface Cushion SRS69134 SRN37884 UPS Courier Delivery - Standard AWB:1Z9W96386842149050	1	0.00 12.00	0.00 2.40	0.00 14.40

Total Net: 77.00  
Total Vat: 15.40  
Total: 92.40

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.