

Invoice Address  
DSFS Limited c/o Chesterfield  
Royal Hospital Financial Services Dept  
Top Road  
Calow  
Chesterfield  
S44 5BL

Delivery Address  
Chesterfield Royal Hospital  
Receipts & Distribution  
Top Road  
Calow  
Chesterfield  
S44 5BL

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 Procurement Department  
Contact Tel 01246277271  
Account 00001170  
Customer Reference 80115059  
Date 24 Sep 2025  
Tracking Number 1Z9W96386840235237  
Priced In UK Pounds

## Invoice RVM159022-1

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

Delivery Reference DVM159022-1 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:PR0408A12 SRS69236 SRN38161				
1430309 Tariff 9031808000 CoO United Kingdom PPUPS1	V1000 Transducer Interface Cushion SRS69236 SRN38161 UPS Courier Delivery - Standard AWB:1Z9W96386840235237	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.