

Invoice Address  
Medway NHSFT  
Finance Dept Residence 13A  
Medway Maritime Hospital  
Windmill Road  
Gillingham  
ME7 5NY

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 Claire Willis  
Contact Tel 01634976264  
Account 00001770  
Customer Reference 260008329  
Date 29 Oct 2025  
Tracking Number 1Z9W96386841844694  
Priced In UK Pounds

## Invoice RVM159024-1

Delivery Address  
Medway Maritime Hospital  
Clinical Engineering  
Level One Blue Zone  
Windmill Road  
Gillingham  
ME7 5NY

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

Delivery Reference DVM159024-1 Contact kate.griffiths@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:PR0773A31 SRS69229 SRN38160				
1430309 Tariff 9031808000 CoO United Kingdom PPUPS1	V1000 Transducer Interface Cushion SRS69229 SRN38160 UPS Courier Delivery - Standard AWB:1Z9W96386841844694	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.