Invoice Address NHS Greater Glasgow and Clyde Payments Department PO Box 7388 Glasgow G51 9BS

Delivery Address Princess Royal Maternity Hospital Medical Physics Dept

4th Floor Glasgow G31 2ER

Supplier Viamed Ltd 15 Station Road Cross Hills 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 Contact Tel Account

Mamata Naik 01412115239 00001830

Customer Reference Date

GMPR15819800 16 Oct 2025

Tracking Number

1Z9W96386842365683

Priced In

UK Pounds

Invoice RVM159245-1

CIP Carriage and Insurance Paid To Glasgow Royal Maternity Hosp, UK * Incoterms(r) 2020 Delivery Reference DVM159245-1 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
1430309 Tariff 9031808000 CoO United Kingdom PPUPS1	S/N: PR02724A12 SRS69246 SRN38179 V1000 Transducer Interface Cushion SRS69246 SRN38179	1	0.00	0.00	0.00
	UPS Courier Delivery - Standard AWB:1Z9W96386842365683		12.00	2.40	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

IBAN BIC BUKBGB22 Terms & conditions https://www.viamed.co.uk/terms

00906662 GB05BUKB20784200906662 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.

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