**Invoice Address** Barts Health NHS Trust Treasury and Payments Department 8th Floor 20 Churchill Place London E14 5HJ

Delivery Address Whipps Cross University Hospital Medical Engineering Dept Whipps Cross Road Leytonstone London

E11 1NR

Supplier Viamed Ltd 15 Station Road Cross Hills

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Mariseth Cabrera Contact Name Contact Tel 02085356927 00003450 Account Customer Reference 41207558 Date 06 Nov 2025

Tracking Number 1Z9W96386842248961

Priced In **UK Pounds** 

## Invoice RVM159815-1

CIP Carriage and Insurance Paid To Whipps Cross Uni Hospital, UK \* Incoterms(r) 2020

## Delivery Reference DVM159815-1 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:PR01202A17 SRS69271 SRN38241 V1000 Transducer Interface Cushion SRS69271 SRN38241	1	0.00	0.00	0.00
	UPS Courier Delivery - Standard AWB:1Z9W96386842248961		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 00906662 Account Number

IBAN GB05BUKB20784200906662

BIC BUKBGB22 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.