

**Invoice Address**

NHS Forth Valley Financial Services
Accounts Payable Department
Administration Building
Falkirk Community Hospital
Falkirk
FK1 5SU

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 Arlene Gallagher
Contact Tel 01324566953
Account 00004880
Customer Reference VMF16157639
Date 18 Jan 2026
Tracking Number 1Z9W96386840759994
Priced In UK Pounds

Delivery Address
Forth Valley Royal Hospital
VL199 0701 Medical Physics
Block J First Floor
Larbert
FK5 4WR

Invoice RVM161082-1

CIP Carriage and Insurance Paid To Forth Valley Royal Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM161082-1 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:PR01985A11 SRS69320 SRN38485				
1430309 Tariff 9031808000 CoO United Kingdom PPUPS1	V1000 Transducer Interface Cushion SRS69320 SRN38485 UPS Courier Delivery - Standard AWB:1Z9W96386840759994	1	0.00	0.00	0.00
		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 00906662
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 full has been received.