

Invoice Address
 Bradford Teaching Hospitals NHSFT
 RAE Payables 4405
 PO Box 312
 Leeds
 LS11 1HP

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 Michele Chiemeka
 Contact Tel 01274542200
 Account 00000620
 Customer Reference 34527972
 Date 09 Feb 2026
 Tracking Number 1Z9W96386842638674
 Priced In UK Pounds

Invoice RVM161508-1

Delivery Address
 Bradford Royal Infirmary
 Receipt and Distribution
 Gate 6
 Smith Lane
 Bradford
 BD9 6RJ

CIP Carriage and Insurance Paid To Bradford Royal Infirmary, UK * Incoterms(r) 2020

Delivery Reference DVM161508-1 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: PR03485A10 SRS69342 SRN38516 | | | | |
| 1430309 Tariff 9031808000 CoO United Kingdom PPUPS1 | V1000 Transducer Interface Cushion SRS69342 SRN38516 UPS Courier Delivery - Standard AWB:1Z9W96386842638674 | 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 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.