

Invoice Address  
NHS Highland  
Finance Department  
Assynt House  
Beechwood Park  
Inverness  
IV2 3BW

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 Sandra Maclean  
Contact Tel 01463704276  
Account 00002310  
Customer Reference HA16273235  
Date 19 Feb 2026  
Tracking Number 1Z9W96386841330159  
Priced In UK Pounds

## Invoice RVM161846-1

Delivery Address  
Raigmore Hospital  
Electromedical Equipment Services  
TP 2255 Medical Physics  
Old Perth Road  
Inverness  
IV2 3UJ

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

Delivery Reference DVM161846-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1410000 Tariff 90318080-00 CoO U.K.	Foetal Heart Simulator V1000  S/N:PR03887A11-PR03887A12	2	676.20	135.24	1,622.88
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841330159		12.00	2.40	14.40

Total Net: 1,364.40  
Total Vat: 272.88  
Total: 1,637.28

Banking details  
Bank Barclays Bank PLC  
Sort Code 20-78-42  
Account Number 00906662  
IBAN GB05BUKB20784200906662  
BIC BUKGBB22  
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.