

Invoice Address
 NHFM Limited
 Finance Department
 7 - 8 Silver Fox Way
 Cobalt Business Park
 Newcastle upon Tyne
 NE27 0QJ

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 Rebecca Newton
 Contact Tel 01434655655
 Account 00002220
 Customer Reference RTFE400481547
 Date 11 Mar 2026
 Tracking Number 1Z9W96386842645004
 Priced In UK Pounds

Invoice RVM162249-1

Delivery Address
 Hexham General Hospital
 1 GHG Docka NH0100
 Loading Dock
 Maidens Walk
 Hexham
 NE46 1QJ

CIP Carriage and Insurance Paid To Hexham General Hospital, UK * Incoterms 2020

Delivery Reference DVM162249-1 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:PR03124A11 SRS69381 SRN38568				
1430309 Tariff 9031808000 CoO United Kingdom PPUPS1	V1000 Transducer Interface Cushion SRN69381 SRN38568 UPS Courier Delivery - Standard AWB:1Z9W96386842645004	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.