

Invoice Address  
Hampshire Hospitals NHSFT  
RN5 Payables F025  
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: Suzanne Allford  
Contact Tel: 01962863535  
Account: 00005380  
Customer Reference: 260540576  
Date: 01 May 2026  
Tracking Number: 1Z9W96386840057653  
Priced In: UK Pounds

## Invoice RVM163177-1

Delivery Address  
Royal Hampshire County Hospital  
Winchester Stores Department  
Queens Road  
Winchester  
SO22 5HS

CIP Carriage and Insurance Paid To Royal Hampshire Hospital, UK \* Incoterms 2020

Delivery Reference DVM163177-1 Contact aqib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1410000 Tariff 90318080-00 CoO U.K.	Foetal Heart Simulator V1000  S/N:PR03926A11	1	676.20	135.24	811.44
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386840057653		12.00	2.40	14.40

Total Net: 688.20  
Total Vat: 137.64  
Total: 825.84

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.