

Invoice Address
UCLH NHS Foundation Trust
Accounts Payable
London
NW1 2PG

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 Rukena Khalique
Contact Tel 02034477771
Account 00003420
Customer Reference RRVN400397322
Date 14 Oct 2025
Vat Number GB 524 3711 68
Tracking Number 1Z9W96386842401017
Priced In UK Pounds

Invoice RVM159350-1

Delivery Address
University College Hospital
Loading Bay Medical Physics Dept
EGA Lev -2 Basement Beaumont Place
Off Tottenham Court Road
London
NW1 2BU

CIP Carriage and Insurance Paid To University College Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM159350-1 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:PR02987A11 SRS69254 SRN38198 | | | | |
| 1430309 Tariff 9031808000 CoO United Kingdom PPUPS1 | V1000 Transducer Interface Cushion SRS69254 SRN38198 UPS Courier Delivery - Standard AWB:1Z9W96386842401017 | 1 | 0.00 12.00 | 0.00 2.40 | 0.00 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 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.