



محلات وصيدلية مسقط ش م م
Muscat Pharmacy & Stores LLC

P.O. Box: 438, Muscat, P.C.: 100, Oman
Tel.: 968 24814501, Fax: 968 24815201/202
C.R. No.: 1/01091/3
E-mail : mphq@mpmct.com
Web : www.muscatpharmacy.net

PURCHASE ORDER

Supplier	Order Details
TO : VIAMED LTD U.K.	Order Reference : 212650/HMY/PVT/OUTLETS
ATTN : MR.SHARAN WALTON (sarah.walton@viamed.co.uk)	Date : 17/JUN/2021
CC : H.Mistry/Anish Mathew	Supplier Offer :

Ship Mode	Ship Terms	Currency	Shipment Arr.
AIR	EX-WORKS	USD	17/07/2021

Sl.No.	Catalog	Description	Qty	Price	Total
1	2810050	MD300-C29 OLED FINGER PULSE OXIMETER	200	26.66	5,332.00
		Bank Charges + Insurance + Express Saver			387.00
TOTAL					5718.00

1. Kindly acknowledge this Order giving details of delivery schedule.
 2. Please mention HS Code against each and every item in your order confirmation / advance Invoice, enabling us to take prior approval from customs authorities, to avoid any delay in the clearance of goods. All original shipment document duly signed and stamped, must be handed over to our forwarders, along with the items.
- **Effective from 1.1.2021, only listed medical devices will be granted approval for shipment clearance.**
 - **All medical devices (New Products/Any Changes) need to be listed at least 10 working days prior to shipping. Please contact Ms. Nijun Joel (nijun@mpmct.com) if you have any further queries.**
 - **Please forward copy of all medical device invoices to device.clearance@mpmct.com at least 5 working days before shipping the goods.**

Best Regards

B.S.MEHTA

Viamed Ltd
15 Station Road
Cross Hills
Keighley, West Yorkshire
BD20 7DT
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

Viamed Ltd



Account



Order Barcode



Delivery Address

Muscat Pharmacy LLC
P.O.Box 438
Muscat
100
Sultanate of Oman

Invoice Address

Muscat Pharmacy LLC
P.O.Box 438
Muscat
100
Sultanate of Oman

Contact Name
Contact Tel

: Harish Mistry
: 0096824814383

Account
Customer Reference
Date
Priority
Valid until

00007020
16062173ZT3
16 Jun 2021
: 3
: 17 Jul 2021

Proforma MVM131071

CIP Carriage and Insurance Paid To * Incoterms® 2020

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Your Viamed Contact for this Proforma : zoey.teal@viamed.co.uk

Item Reference	Description	Quantity	\$ Unit	\$ Unit Vat	\$ Total
2810050	MD300-C29 OLED Finger Pulse Oximeter	200	26.66	0.00	5,332.00
BC	Bank Charges	1	25.00	0.00	25.00
INS	Insurance	1	53.32	0.00	53.32
PPUPS7	UPS Courier Delivery - Express Saver 2 boxes = 36 x 36 x 36 cm each. 10.80kg each.	1	307.97	0.00	307.97

Total Net: \$ 5,718.29
Total Vat: \$ 0.00
Total: \$ 5,718.29

285

Banking details
Bank
Sort Code
Account Number
IBAN
BIC
Terms and conditions <https://www.viamed.co.uk/terms>

BIC
Barclays Bank
20-78-42
89771244
GB82BUKB20784289771244
BUKBGB22

Full proforma amount to be credited to our account net of all bank charges.
Claims: Please claim non delivery within 14 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.
Proforma Valid for 30 days only.
Viamed Ltd reserves the right to add an administration fee to the Proforma if multiple changes are requested.