

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

# Viamed Ltd



## Delivery Address

Inspira d.o.o.  
Pot Na Labar 9  
Ljubljana  
1000  
Slovenia

## Invoice Address

Inspira D.o.o.  
Pot Na Labar 9  
Ljubljana  
1000  
Slovenia  
VAT SI21299285

## Contact Name Contact Tel

: Mateja Cepon  
: 0038682052973

## Account Customer Reference Date Priority Valid until Priced In

CID25631  
24-0231  
21 Nov 2024  
3  
: 22 Dec 2024  
Euros

## Proforma Invoice MVM153510

Page 1

CIP Carriage and Insurance Paid To Inspira, Slovenia \* Incoterms(R) 2020

Your Viamed Contact for this Proforma Invoice : [aqib.majeed@viamed.co.uk](mailto:aqib.majeed@viamed.co.uk)

| Item Reference                                    | Description   | Quantity | Unit  | Unit Vat | Total    |
|---|---|----------|-------|----------|----------|
| 1114005<br>Tariff 9018199000<br>CoO United States | EyeMax 2 Neonatal Phototherapy Mask - Regular<br>Ref. R300P01<br>Pack of 20 | 40       | 48.40 |          | 1,936.00 |
| 1114005<br>Tariff 9018199000<br>CoO United States | EyeMax 2 Neonatal Phototherapy Mask - Regular<br>Ref. R300P01<br>Pack of 20 | 4        | 0.00  |          | 0.00     |
| 1114006<br>Tariff 9018199000<br>CoO U.S.A.        | EyeMax 2 Neonatal Phototherapy Mask - Premie<br>Ref. R300P02<br>Pack of 20  | 20       | 48.40 |          | 968.00   |
| 1114006<br>Tariff 9018199000<br>CoO U.S.A.        | EyeMax 2 Neonatal Phototherapy Mask - Premie<br>Ref. R300P02<br>Pack of 20  | 2        | 0.00  |          | 0.00     |
| INS   | Insurance   | 1        | 29.04 |          | 29.04    |

Banking details  
Bank  
Sort Code  
Account Number  
IBAN  
BIC

BIC  
Barclays Bank  
20-78-42  
87399700  
GB33BUKB20784287399700  
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.

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CIP Carriage and Insurance Paid To Inspira, Slovenia \* Incoterms(R) 2020

| Item Reference | Description                     | Quantity | Unit  | Unit Vat | Total |
|----------------|---------------------------------|----------|-------|----------|-------|
| PPUPS6         | UPS Courier Delivery - Standard | 1        | 26.23 |          | 26.23 |
|                | 61 x 47 x 47cm                  |          |       |          |       |
|                | 9kg                             |          |       |          |       |

Total Net: 2,959.27  
Total Vat: 0.00  
Total: 2,959.27

Banking details  
Bank BIC  
Sort Code 20-78-42  
Account Number 87399700  
IBAN GB33BUKB20784287399700  
BIC BUKGB22  
Terms and conditions <https://www.viamed.co.uk/terms>

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