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

Union Mediscience Office No 13 Bldg 2304 Road 2830 Block 428 Al Seef District Kingdom Of Bahrain Invoice Address

Union Mediscience Office No 13 Bldg 2304 Road 2830 Block 428 Al Seef District Kingdom Of Bahrain Contact Name Contact Tel

Date

Valid until

Priced In

: Hasan Albaqali : 0097317551080

Account Customer Reference

00007695 16742594AM 16 Apr 2025

US Dollars

Priority 3

: 17 May 2025

Proforma Invoice MVM156308

Page 1

CIP Carriage and Insurance Paid To Union Mediscience, Bahrain * Incoterms(R) 2020

Your Viamed Contact for this Proforma Invoice : agib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regularies Ref. R300P01 Pack of 20	ar 25	50.80	0.00	1,270.00
Bank Charges	Bank Charges	1	25.00	0.00	25.00
INS	Insurance	1	12.70	0.00	12.70
PPUPS7	UPS Courier Delivery - Express Saver	1	174.29	0.00	174.29
	61 x 47 x 25cm				

Total Net: 1,481.99
Total Vat: 0.00

Total: 1,481.99

Banking details Bank Sort Code Account Number IBAN BIC Barclays Bank 20-78-42 89771244 GB82BUKB20784289771244

5kg

IBAN GB82BUKB20784289771244
BIC BUKBGB22
Terms and conditions https://www.viamed.co.uk/terms

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.

Full proforma amount to be credited to our account net of all bank charges.