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** 

Tenacore LLC 3115 Airway Avenue Costa Mesa California 92626 **United States** 

Invoice Address

Tenacore LLC 3115 Airway Avenue Costa Mesa California 92626 **United States** 

Contact Name Contact Tel

: Katy Romanowski : 008002972241

Account

Customer Reference

00007996 PO7876/ SRS69205

Date

20 Aug 2025

Priority

7

Valid until Priced In

20 Sep 2025 **US Dollars** 

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## Proforma Invoice MVM158586

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

Your Viamed Contact for this Proforma Invoice: 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	63.40	0.00	63.40
ВС	S/N:PR02976A11 SRS69205 SRN38113 Bank Charges	1	10.00	0.00	10.00
INS	Insurance	1	12.50	0.00	12.50
PPUPS7	UPS Courier Delivery - Express Saver	1	36.93	0.00	36.93

Total Net: 122.83 Total Vat: 0.00 Total: 122.83

Banking details Bank Sort Code Account Number IBAN

BIC Barclays Bank 20-78-42 89771244 GB82BUKB20784289771244 BIC BUKBGB22
Terms and conditions https://www.viamed.co.uk/terms

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. 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.