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# Viamed Ltd



Delivery Address	Invoice Address	Contact Name	: Katy Romanowski
Tenacore LLC	Tenacore LLC	Contact Tel	: 8002972241
3115 Airway Avenue	3115 Airway Avenue	Account	00007996
Costa Mesa	Costa Mesa	Customer Reference	SRS69379
California	California	Date	06 Mar 2026
92626	92626	Priority	7
United States	United States	Valid until	06 Apr 2026
		Priced In	US Dollars
			Page 1

## Proforma Invoice MVM162250

EXW Ex Works Viamed, UK \* Incoterms 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
1430309 Tariff 9031808000 CoO United Kingdom	S/N:PR01807A10 SRS69379 SRN38567 V1000 Transducer Interface Cushion	1	0.00	0.00	0.00
BC	SRS69379 SRN38567 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	39.11	0.00	39.11

Total Net: 125.01  
 Total Vat: 0.00  
 Total: 125.01

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