

Viamed Ltd
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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

Neo Plus Sp. z o.o
Wierzejska 94/12
Piotrkow Trybunalski
97300
Poland

Invoice Address

Neo Plus Sp. Z O.o
Wierzejska 94/12
Piotrkow Trybunalski
97300
Poland
VAT PL7712889002

Contact Name : Michalina Maslowska
Contact Tel : 48446167299

Account 00006609
Customer Reference ZD 55/2026
Date 14 Jul 2026
Priority 2

Valid until 14 Aug 2026
Priced In US Dollars
Page 1

Proforma Invoice MVM164676

EXW Ex Works Viamed, UK * Incoterms 2020

Your Viamed Contact for this Proforma Invoice : kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114015 Tariff 90181990-00 CoO China	NeoMask Neonatal Phototherapy Mask Model: Type III - Large. Pack of 20.	25	36.00	0.00	900.00
1114016 Tariff 90181990-00 CoO China	NeoMask Neonatal Phototherapy Mask Model: Type III - Medium. Pack of 20.	30	36.00	0.00	1,080.00
Bank Charges	Bank Charges	1	20.00	0.00	20.00
EXW	Delivery: EXW - Viamed, UK (Incoterms 2020) Consigned to: 61 x 47 x 47 cm 10.2 kg	1	0.00	0.00	0.00

Total Net: 2,000.00
Total Vat: 0.00
Total: 2,000.00

Banking details
Bank BIC
Sort Code Barclays Bank
Account Number 20-78-42
IBAN 89771244
BIC GB82BUKB20784289771244
Terms and conditions BUKGB22
<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.