

Invoice Address  
MSE Group  
Financial Services Department  
Unit 12-14 Britannia Park  
Comet Way  
Southend-On-Sea  
SS2 6GE

Supplier  
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



Contact Name Tanya Miller  
Contact Tel 01702508118  
Account 00005320  
Customer Reference LC141739  
Date 16 Jan 2024  
Tracking Number 1Z9W96386840083446  
Priced In UK Pounds

## Invoice RVM147568-1

Delivery Address  
Southend Hospital  
Goods Receiving  
Via Rear of Hospital  
Carlingford Drive  
Westcliff-on-Sea  
Essex  
SS0 0RY

CIP Carriage and Insurance Paid To Southend Hospital, UK \* Incoterms(r) 2020

Delivery Reference DVM147568-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005 Tariff 9018199000 CoO United States	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	2	55.30	11.06	132.72
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	2	55.30	11.06	132.72
1114007 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Micro Ref. R300P03 Pack of 20	1	55.30	11.06	66.36
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386840083446		12.00	2.40	14.40

Total Net: 288.50  
Total Vat: 57.70  
Total: 346.20

Banking details  
Bank Barclays Bank PLC  
Sort Code 20-78-42  
Account Number 00906662  
IBAN GB05BUKB20784200906662  
BIC BUKGBB22  
Terms & conditions <https://www.viamed.co.uk/terms>

Terms: Net 30 days from date of invoice.  
Full invoice amount to be credited to our account net of all bank charges.  
Claims: Please claim non delivery within 7 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.