Invoice Address Medisyst Limited Vision Plaza 36 First Floor Mombasa Road P O Box 6572 City Square Nairobi Kenya 00200

Delivery Address Jambo Cargo Limited Access House 1 Nestle Avenue Hayes London UB3 4UZ

Supplier Viamed Ltd 15 Station Road Cross Hills

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

Kennedy Watanga Contact Name 0025420788580 Contact Tel 00007309 Account **Customer Reference** 16072484KG Date 18 Jul 2024

Tracking Number 1Z9W96386878847916

Priced In **US Dollars**

Invoice RVM151110-1

CIP Carriage and Insurance Paid To London, UK * Incoterms(r) 2020

Delivery Reference DVM151110-1 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 - Regu Ref. R300P01 Pack of 20	ılar 40	50.80	0.00	2,032.00
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	nie 20	50.80	0.00	1,016.00
Bank Charges	Bank Charges		25.00	0.00	25.00
PPUPS1	UPS Courier Delivery - Standard 61 x 47 x 47 cm 11.40 kg AWB:1Z9W96386878847916		46.29	0.00	46.29

Total Net: 3,119.29 Total Vat: 0.00 Total: 3,119.29

Banking details Bank Sort Code Account Number IBAN

Barclays Bank 20-78-42 89771244 GB82BUKB20784289771244

BUKBGB22

Terms & conditions https://www.viamed.co.uk/terms

Full invoice 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.

Terms: Net 30 days from date of invoice.

Claims after these times cannot be entertained.
Title to goods does not pass until payment in full has been received.

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