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

Delivery Address Broomfield Hospital Goods Receiving Office Court Road Broomfield

Chelmsford CM1 7ET

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

Tracking Number

Procurement Contact Name Contact Tel 03004430144 00001045 Account Customer Reference LC192590 Date 31 Jan 2025

Priced In **UK Pounds**

Invoice RVM154790-1

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

Delivery Reference DVM154790-1 Contact sophie.lines@viamed.co.uk

| Item Reference | Description | Quantity | Unit | Unit Vat | Total |
|--|--|----------|-------|----------|--------|
| 1114006 Tariff 9018199000 CoO Mexico | EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20 | ie 2 | 55.30 | 11.06 | 132.72 |
| PPUPS1 | UPS Courier Delivery - Standard AWB:1Z9W96386841714762 | | 10.00 | 2.00 | 12.00 |

Total Net: 120.60 Total Vat: 24.12 Total: 144.72

1Z9W96386841714762

Banking details

Barclays Bank PLC Bank Sort Code 20-78-42 00906662 Account Number

IBAN BIC BUKBGB22 Terms & conditions https://www.viamed.co.uk/terms

GB05BUKB20784200906662

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.

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