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

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

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

Contact Name

Procurement Department

01702508118 Contact Tel 00005320 Account LC196923 Customer Reference Date 05 Mar 2025

Tracking Number 1Z9W96386877468408

Priced In **UK Pounds**

Invoice RVM155413-1

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

Delivery Reference DVM155413-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regul Ref. R300P01 Pack of 20	ar 1	56.70	11.34	68.04
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Premi Ref. R300P02 Pack of 20	e 1	56.70	11.34	68.04
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386877468408		10.00	2.00	12.00

Total Net: 123.40 Total Vat: 24.68 Total: 148.08

Banking details Bank Sort Code

20-78-42 00906662 Account Number IBAN

GB05BUKB20784200906662 BUKBGB22

Barclays Bank PLC

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.

Terms: Net 30 days from date of invoice.

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