Invoice Address
Inspira d.o.o.
Pot na Labar 9
Ljubljana
1000
Slovenia

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	Mateja Cepon
Contact Tel	0038682052973
Account	CID25631
Customer Reference	26-0207
Date	13 Aug 2026
Vat Number	SI21299285
Tracking Number	1Z9W96386878129871
Priced In	Euros

Delivery Address
Inspira d.o.o.
Pot na Labar 9
Ljubljana
1000
Slovenia

Invoice RVM165194-1 Paid

CIP Carriage and Insurance Paid To Inspira, Slovenia * Incoterms 2020

Delivery Reference DVM165194-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114005 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Regular Ref. R300P01 Pack of 20	40	48.40	0.00	1,936.00
1114006 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Premie Ref. R300P02 Pack of 20	25	48.40	0.00	1,210.00
1114007 Tariff 9018199000 CoO Mexico	EyeMax 2 Neonatal Phototherapy Mask - Micro Ref. R300P03 Pack of 20	5	48.40	0.00	242.00
INS	Insurance		33.88	0.00	33.88
PPUPS6	UPS Courier Delivery - Standard 1 x 61x47x47cm 9kg 1 x 61x47x25cm 5kg AWB:1Z9W96386878129871 1Z9W96386878662080		42.00	0.00	42.00

Total Net:	3,463.88
Total Vat:	0.00
Total:	3,463.88

Banking details

Bank	Barclays Bank
Sort Code	20-78-42
Account Number	87399700
IBAN	GB33BUKB20784287399700
BIC	BUKBGB22

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 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.