

TIDI Products, LLC
P.O. BOX 806 NEENAH, WI 54957-0806
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excellence@tidiproducts.com
www.tidiproducts.com

Bill to: 8954

Viamed Ltd 15 Station Rd Cross Hills Keighley

West Yorkshire Fn Y08 5Dd

United Kingdom

Send Payments To:

TIDI Products, LLC PO Box 776290 Chicago, IL 60677-6290

Wire Transfer Information:

CIBC Bank USA 120 S. LaSalle Chicago, IL 60603 USA Swift code: PVTBUS44 ABA routing: 071006486

Account name: TIDI Products, LLC

Account number: 2461269

Ship To

Viamed Ltd

15 Station Rd Cross Hills

Keighley

West Yorkshire Fn Y08 5Dd

Great Britain

ATTENTION: System update on Oct 3rd - https://www.tidiproducts.com/erp-faqs for more INFO

Order No.	Ordered	Shipped	Invoiced	Terms	PO	Invoice
1671254-00	11/10/22	11/29/22	11/29/22	10% FOREIGN NET 1	Pvm2822	003505699

 Number		Product U/M Description		antity Shipped		
6554	DZ	Posey Oximeter Probe Wrap Lot:2312T058 Qty:1,440	1440	1440	6.91	9950.40
4648	DZ	Posey Removable "Id" Lot:2298T136 Qty:100	100	100	8.91	891.00

THANK YOU FOR YOUR ORDER

These commodities, technology, or software were exported from the United States in accordance with the Export Administration Regulations. Diversion contrary to U.S. law is prohibited.

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TIDI INVOICE POLICY	Subtotal USD	10841.40	
Buyer must refuse all damaged product or products shipped in error at time of receiving shipment.			
Buyer must note all damages and other discrepancies on signed delivery.	Cash Payment By 11-30-22 Deduct	1084.14	
3. Buyer must report all receiving discrepancies to Customer Service within 72 hours of delivery date.			
4. Failure to fulfill terms of this policy may result in invoice adjustments being declined.			
5. All returns without prior approval of Customer Service will be refused. Returns are subject to a			
restocking fee except for shipping errors or defective product.			
6. All payments must be made in cash or equivalent in USD.	Amount Due USD	10841.40	
7. This invoice is subject to TIDI Products, LLC's terms and conditions.	Allound Due USD	10041.40	
8. A deliquency charge at the rate of 1.5% per month shall be assessed on the unpaid balance of this invoice if not	77 70 70	11 /20 /00	
paid at net due date. INV91014	Net Due Date	11/30/22	