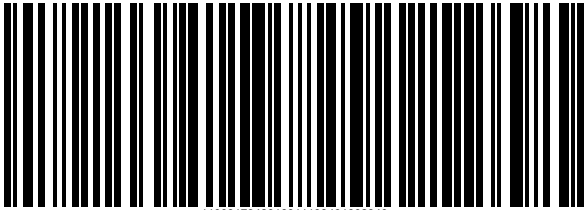


		INT/ROAD	1	
Con No. 317342016		Service Economy Express (ND)		
Piece 1 of 1	Weight 1.60kg	Options (EDO) EDO		
Customer Reference RVM146989-1		Origin BA4 Pickup Date 04 Dec 2023		
S/R Account No 000113678				
Sender Viamed Limited 15 Station Road cross hills bd207dt GB		Routing KG4		
Receiver Henrik Rustad +470769262900 Jacomedic C/O Modul Nordic AS Dalstuvegan 18 Loten 2340 NO		UDE		
		HL3		
		OSL		
Postcode / Cluster Code		PO	Dest Depot NW1 12	
Delivery instructions:				



1100317342016011138431002340

Consignment Note

1. From (Collection Address)

Sender's Account No: 000113678
Name: Viamed Limited
Address: 15 Station Road
City: cross hills
Province:
Postal/Zip Code: bd207dt
Location: UNITED KINGDOM

Contact Name: Catherine Green
Tel No: 01535634542

2. To (Receiver Address)

Receiver's Account No: 000014662
Name: Jacomedic
Address: C/O Modul Nordic AS
Dalstuvegan 18
City: Loten
Province:
Postal/Zip Code: 2340
Location: NORWAY

Contact Name: Henrik Rustad
Tel No: +470769262900

3. Goods

General Description:
Oxygen monitor
HS Tariff Code:
Total Packages: Total Weight: Total Volume:
1 1.600 kg 0.015 m3

4. Services

Service: (48N) Economy Express
Options: (EDO) EDO

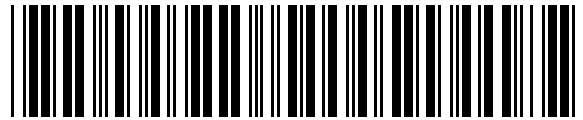
Payment Terms: Receiver Pays

NON DANGEROUS GOODS

Sender's Signature: _____

Date: ____/____/____

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*** 3 1 7 3 4 2 0 1 6 ***

Please quote this number if you have an enquiry.

A. Delivery Address

Name: Jacomedic
Address: C/O Modul Nordic AS
Dalstuvegan 18
City: Loten
Province:
Postal/Zip Code: 2340
Location: NORWAY

Contact Name: Henrik Rustad
Tel No: +470769262900

B. Dutiable Shipment Details

Receivers VAT/TVA/BTW/MWST No.: NO986938230MVA

Invoice Value of Dutiables: 690 EUR

C. Special Delivery Instructions

D. Customer Reference

RVM146989-1

E. Invoice Receiver (Receiver's Account Number)

000014662

Received by TNT (Name): _____

Date: ____/____/____ Time: ____:____

Customs Copy

Please keep for reference

Consignment Note

1. From (Collection Address)

Sender's Account No: 000113678
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Address: 15 Station Road
City: cross hills
Province:
Postal/Zip Code: bd207dt
Location: UNITED KINGDOM

Contact Name: Catherine Green
Tel No: 01535634542

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Receiver's Account No: 000014662
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Province:
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Options: (EDO) EDO

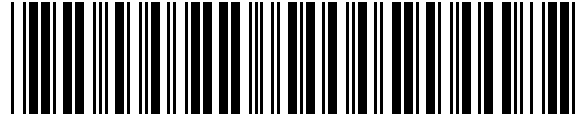
Payment Terms: Receiver Pays

NON DANGEROUS GOODS

Sender's Signature: _____

Date: ____/____/____

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Please quote this number if you have an enquiry.

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Province:
Postal/Zip Code: 2340
Location: NORWAY

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Tel No: +470769262900

B. Dutiable Shipment Details

Receivers VAT/TVA/BTW/MWST No.: NO986938230MVA

C. Special Delivery Instructions

D. Customer Reference

RVM146989-1

E. Invoice Receiver (Receiver's Account Number)

000014662

Received by TNT (Name): _____

Date: ____/____/____ Time: ____:____

Receiver Copy

Please keep for reference

Invoice Address
Jacomedic AS
C/O Modul Nordic AS
Dalstuvegan 18
Loten
2340
Norway

Delivery Address
Jacomedic AS
C/O Modul Nordic AS
Dalstuvegan 18
Loten
2340
Norway

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 Henrik Rustad
Contact Tel 0769262900
Account 00007592
Customer Reference 29
Date 01 Dec 2023
Vat Number NO986938230MVA
Priced In Euros

Invoice RVM146989-1

EXW Ex Works Viamed, UK * Incoterms(r) 2020

Delivery Reference DVM146989-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0012166 Tariff 9018199000 CoO Germany	Viamed Pulse Oximeter VM-2160 SMARTsat Standard accessories included: 1 x PC Software 1 x USB Data Cable 1 x Silicone Protective Cover 1 x Lanyard 3 x AA Batteries Language package version: Scandinavian including: English, Danish, Dutch, Finish and Swedish Also includes sensor as detailed below. S/N:T2304200203-T2304200204	2	345.00	0.00	690.00
0014752 Tariff 90181990-00 CoO E.U. Germany	Pulse Oximetry Silicone Finger Sensor Viamed SMARTsat - Adult - SC7500VM Cable Length: 1.2m S/N:IEK10126-IEK10127	2	0.00	0.00	0.00
EXW	Delivery: EXW - Viamed, UK (Incoterms 2020) Consigned to: TNT Account: 000014662		0.00	0.00	0.00

Total Net: 690.00
Total Vat: 0.00
Total: 690.00

Banking details
Bank Barclays Bank
Sort Code 20-78-42
Account Number 87399700
IBAN GB33BUKB20784287399700
BIC BUKGBB22
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.

Invoice Address
Jacomedic AS
C/O Modul Nordic AS
Dalstuvegan 18
Loten
2340
Norway

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



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Contact Tel 0769262900
Account 00007592
Customer Reference 29
Date 01 Dec 2023
Vat Number NO986938230MVA
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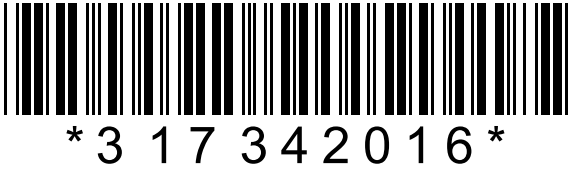
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DETAILED MANIFEST

RECEIVER PAYS

Pickup id: Web Channel
Booking created on: 01 Dec 2023 GMT
Shipment Date: 04 Dec 2023 (local time)

Service Options G (48N) Economy Express (EDO) EDO



NON DANGEROUS GOODS

Special Instructions

Shipment reference
RVM146989-1

Sender Account: 000113678

Viamed Limited
15 Station Road
cross hills
bd207dt
UNITED KINGDOM

Contact: Catherine Green
Tel: 01535634542

Receiver Account: 000014662

Jacomedic
C/O Modul Nordic AS
Dalstuvegan 18
Loten
2340
NORWAY

Contact: Henrik Rustad
Tel: +470769262900
VAT Nr.: NO986938230MVA

Collection Name Viamed Limited
Collection Address 15 Station Road
cross hills, bd207dt, UNITED KINGDOM
Delivery Name Jacomedic
Delivery Address C/O Modul Nordic AS, Dalstuvegan 18
Loten, 2340, NORWAY
Goods Description Oxygen monitor

No Pieces: 1 Weight: 1.600 kg Volume: 0.015 m3 Insurance Value: Invoice Value: 690 EUR

Package Description BOX Dimensions (L x W x H)
0.31m x 0.31m x 0.15m

Sender's Signature Date ____/____/____

Received by TNT Date ____/____/____ Time ____:____ hrs

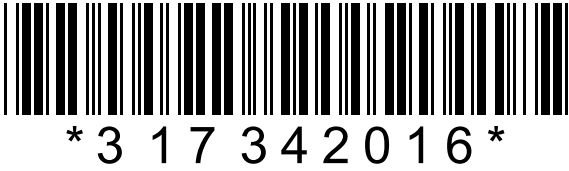
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