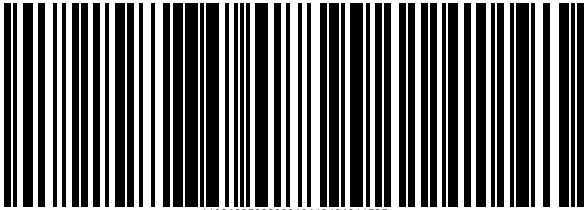


		INT/ROAD		<div></div>		2	
Con No. 163560888				Service Economy Express (ND)			
Piece 1 of 1		Weight 1.20kg		Options (EDO) EDO			
Customer Reference RVM149118-1				Origin BA4 Pickup Date 16 May 2024			
S/R Account No 000113678							
Sender Viamed Limited 15 Station Road cross hills bd207dt GB				Routing KG4 MV9 IMR			
Receiver Athina Kokkori +302105050054							
Bio- Provider 36 Katechaki Ave N.Psychiko Athens 115 25 GR				Sort			
Postcode / Cluster Code		41		Dest Depot		ATH 27	
Delivery instructions:							



1100163560888010448431011525

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: 000111539
Name: Bio- Provider
Address: 36 Katechaki Ave
N.Psychiko
City: Athens
Province:
Postal/Zip Code: 115 25
Location: GREECE

Contact Name: Athina Kokkori
Tel No: +302105050054

3. Goods

General Description:

Oxygen Sensor

HS Tariff Code:

Total Packages:	Total Weight:	Total Volume:
1	1.200 kg	0.012 m3

4. Services

Service: (48N) Economy Express

Options: (EDO) EDO

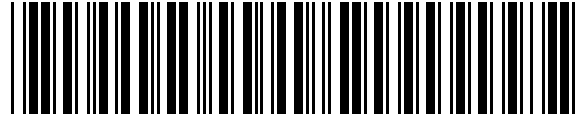
Payment Terms: Receiver Pays

NON DANGEROUS GOODS

Sender's Signature: _____

Date: ____/____/____

TNT'S LIABILITY FOR LOSS, DAMAGE AND DELAY IS LIMITED BY THE CMR CONVENTION OR THE WARSAW CONVENTION WHICHEVER IS APPLICABLE. THE SENDER AGREES THAT THE GENERAL CONDITIONS, WHICH CAN BE VIEWED AT [HTTPS://WWW.TNT.COM/TERMS](https://www.tnt.com/terms), ARE ACCEPTABLE AND GOVERN THIS CONTRACT. IF NO SERVICES OR BILLING OPTIONS ARE SELECTED THE FASTEST AVAILABLE SERVICE WILL BE CHARGED TO THE SENDER.



* 1 6 3 5 6 0 8 8 8 *

Please quote this number if you have an enquiry.

A. Delivery Address

Name: Bio- Provider
Address: 36 Katechaki Ave
N.Psychiko
City: Athens
Province:
Postal/Zip Code: 115 25
Location: GREECE

Contact Name: Athina Kokkori
Tel No: +302105050054

B. Dutiable Shipment Details

Receivers VAT/TVA/BTW/MWST No.: EL099007886

Invoice Value of Dutiables: 1551.6 USD

C. Special Delivery Instructions

D. Customer Reference

RVM149118-1

E. Invoice Receiver (Receiver's Account Number)

000111539

Received by TNT (Name): _____

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

Customs Copy

Please keep for reference

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: 000111539
Name: Bio- Provider
Address: 36 Katechaki Ave
N.Psychiko
City: Athens
Province:
Postal/Zip Code: 115 25
Location: GREECE

Contact Name: Athina Kokkori
Tel No: +302105050054

3. Goods

General Description:
Oxygen Sensor
HS Tariff Code:
Total Packages: Total Weight: Total Volume:
1 1.200 kg 0.012 m3

4. Services

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

Payment Terms: Receiver Pays

NON DANGEROUS GOODS

Sender's Signature: _____

Date: ____/____/____

TNT'S LIABILITY FOR LOSS, DAMAGE AND DELAY IS LIMITED BY THE CMR CONVENTION OR THE WARSAW CONVENTION WHICHEVER IS APPLICABLE. THE SENDER AGREES THAT THE GENERAL CONDITIONS, WHICH CAN BE VIEWED AT [HTTPS://WWW.TNT.COM/TERMS](https://www.tnt.com/terms), ARE ACCEPTABLE AND GOVERN THIS CONTRACT. IF NO SERVICES OR BILLING OPTIONS ARE SELECTED THE FASTEST AVAILABLE SERVICE WILL BE CHARGED TO THE SENDER.



* 1 6 3 5 6 0 8 8 8 *

Please quote this number if you have an enquiry.

A. Delivery Address

Name: Bio- Provider
Address: 36 Katechaki Ave
N.Psychiko
City: Athens
Province:
Postal/Zip Code: 115 25
Location: GREECE

Contact Name: Athina Kokkori
Tel No: +302105050054

B. Dutiable Shipment Details

Receivers VAT/TVA/BTW/MWST No.: EL099007886

C. Special Delivery Instructions

D. Customer Reference

RVM149118-1

E. Invoice Receiver (Receiver's Account Number)

000111539

Received by TNT (Name): _____

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

Receiver Copy

Please keep for reference

Invoice Address
Bio-Provider
36 Katechaki Ave
N. Psychiko
Athens
11525
Greece

Delivery Address
Bio-Provider
36 Katechaki Ave
N. Psychiko
Athens
11525
Greece

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 Athina Kokkori
Contact Tel 00302105050054
Account 00007148
Customer Reference BIOVIAMED01042024
Date 16 May 2024
Vat Number EL099007886
Priced In US Dollars

Invoice RVM149118-1

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

Delivery Reference DVM149118-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110017 Tariff 901920900 CoO United States	Teledyne Sensor R-17MED S/N:143484-143489	6	47.90	0.00	287.40
0110453 Tariff 9019209000 CoO United States	Maxtec Oxygen sensor MAX-250MS S/N:KC38599211,	14	90.30	0.00	1,264.20
BC	Bank Charges		45.00	0.00	45.00
EXW	Delivery: EXW - Viamed, UK (Incoterms 2020) Consigned to: TNT Account: 000111539		0.00	0.00	0.00

Total Net: 1,596.60
Total Vat: 0.00
Total: 1,596.60

Banking details
Bank Barclays Bank
Sort Code 20-78-42
Account Number 89771244
IBAN GB82BUKB20784289771244
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
Bio-Provider
36 Katechaki Ave
N. Psychiko
Athens
11525
Greece

Delivery Address
Bio-Provider
36 Katechaki Ave
N. Psychiko
Athens
11525
Greece

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 Athina Kokkori
Contact Tel 00302105050054
Account 00007148
Customer Reference BIOVIAMED01042024
Date 16 May 2024
Vat Number EL099007886
Priced In US Dollars

Invoice RVM149118-1

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

Delivery Reference DVM149118-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110017 Tariff 901920900 CoO United States	Teledyne Sensor R-17MED S/N:143484-143489	6	47.90	0.00	287.40
0110453 Tariff 9019209000 CoO United States	Maxtec Oxygen sensor MAX-250MS S/N:KC38599211,	14	90.30	0.00	1,264.20
BC	Bank Charges		45.00	0.00	45.00
EXW	Delivery: EXW - Viamed, UK (Incoterms 2020) Consigned to: TNT Account: 000111539		0.00	0.00	0.00

Total Net: 1,596.60
Total Vat: 0.00
Total: 1,596.60

Banking details
Bank Barclays Bank
Sort Code 20-78-42
Account Number 89771244
IBAN GB82BUKB20784289771244
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
Bio-Provider
36 Katechaki Ave
N. Psychiko
Athens
11525
Greece

Delivery Address
Bio-Provider
36 Katechaki Ave
N. Psychiko
Athens
11525
Greece

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 Athina Kokkori
Contact Tel 00302105050054
Account 00007148
Customer Reference BIOVIAMED01042024
Date 16 May 2024
Vat Number EL099007886
Priced In US Dollars

Invoice RVM149118-1

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

Delivery Reference DVM149118-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110017 Tariff 901920900 CoO United States	Teledyne Sensor R-17MED S/N:143484-143489	6	47.90	0.00	287.40
0110453 Tariff 9019209000 CoO United States	Maxtec Oxygen sensor MAX-250MS S/N:KC38599211,	14	90.30	0.00	1,264.20
BC	Bank Charges		45.00	0.00	45.00
EXW	Delivery: EXW - Viamed, UK (Incoterms 2020) Consigned to: TNT Account: 000111539		0.00	0.00	0.00

Total Net: 1,596.60
Total Vat: 0.00
Total: 1,596.60

Banking details
Bank Barclays Bank
Sort Code 20-78-42
Account Number 89771244
IBAN GB82BUKB20784289771244
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
Bio-Provider
36 Katechaki Ave
N. Psychiko
Athens
11525
Greece

Delivery Address
Bio-Provider
36 Katechaki Ave
N. Psychiko
Athens
11525
Greece

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 Athina Kokkori
Contact Tel 00302105050054
Account 00007148
Customer Reference BIOVIAMED01042024
Date 16 May 2024
Vat Number EL099007886
Priced In US Dollars

Invoice RVM149118-1

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

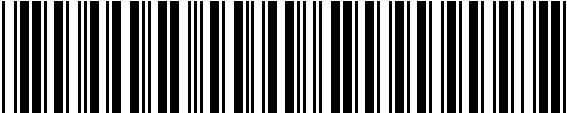
Delivery Reference DVM149118-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110017 Tariff 901920900 CoO United States	Teledyne Sensor R-17MED S/N:143484-143489	6	47.90	0.00	287.40
0110453 Tariff 9019209000 CoO United States	Maxtec Oxygen sensor MAX-250MS S/N:KC38599211,	14	90.30	0.00	1,264.20
BC	Bank Charges		45.00	0.00	45.00
EXW	Delivery: EXW - Viamed, UK (Incoterms 2020) Consigned to: TNT Account: 000111539		0.00	0.00	0.00

Total Net: 1,596.60
Total Vat: 0.00
Total: 1,596.60

Banking details
Bank Barclays Bank
Sort Code 20-78-42
Account Number 89771244
IBAN GB82BUKB20784289771244
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.

DETAILED MANIFEST		<div>TNT</div> <div></div> <div>* 1 6 3 5 6 0 8 8 8 *</div>	
RECEIVER PAYS Pickup id: Web Channel Booking created on: 16 May 2024 GMT Shipment Date: 16 May 2024 (local time)			
Service Options G (48N) Economy Express (EDO) EDO		NON DANGEROUS GOODS	
Special Instructions		Shipment reference RVM149118-1	
Sender Viamed Limited 15 Station Road cross hills bd207dt UNITED KINGDOM Contact: Catherine Green Tel: 01535634542		Receiver Bio- Provider 36 Katechaki Ave N.Psychiko Athens 115 25 GREECE Contact: Athina Kokkori Tel: +302105050054 VAT Nr.: EL099007886	
Collection Name Viamed Limited			
Collection Address 15 Station Road cross hills, bd207dt, UNITED KINGDOM			
Delivery Name Bio- Provider			
Delivery Address 36 Katechaki Ave, N.Psychiko Athens, 115 25, GREECE			
Goods Description Oxygen Sensor			
No Pieces: 1		Weight: 1.200 kg	
		Volume: 0.012 m3	
		Insurance Value:	
		Invoice Value: 1551.6 USD	
Package Description BOX		Dimensions (L x W x H) 0.31m x 0.24m x 0.16m	

Sender's Signature

Date

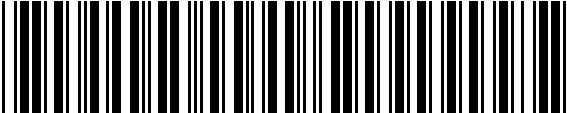
Received by TNT

Date

Time

hrs

TNT'S LIABILITY FOR LOSS, DAMAGE AND DELAY IS LIMITED BY THE CMR CONVENTION OR THE WARSAW CONVENTION WHICHEVER IS APPLICABLE. THE SENDER AGREES THAT THE GENERAL CONDITIONS, WHICH CAN BE VIEWED AT [HTTPS://WWW.TNT.COM/TERMS](https://www.tnt.com/terms) , ARE ACCEPTABLE AND GOVERN THIS CONTRACT. IF NO SERVICES OR BILLING OPTIONS ARE SELECTED THE FASTEST AVAILABLE SERVICE WILL BE CHARGED TO THE SENDER.

DETAILED MANIFEST		<div>TNT</div> <div></div> <div>* 1 6 3 5 6 0 8 8 8 *</div>	
RECEIVER PAYS Pickup id: Web Channel Booking created on: 16 May 2024 GMT Shipment Date: 16 May 2024 (local time)			
Service Options G (48N) Economy Express (EDO) EDO		NON DANGEROUS GOODS	
Special Instructions		Shipment reference RVM149118-1	
Sender Viamed Limited 15 Station Road cross hills bd207dt UNITED KINGDOM Contact: Catherine Green Tel: 01535634542		Receiver Bio- Provider 36 Katechaki Ave N.Psychiko Athens 115 25 GREECE Contact: Athina Kokkori Tel: +302105050054 VAT Nr.: EL099007886	
Collection Name Viamed Limited			
Collection Address 15 Station Road cross hills, bd207dt, UNITED KINGDOM			
Delivery Name Bio- Provider			
Delivery Address 36 Katechaki Ave, N.Psychiko Athens, 115 25, GREECE			
Goods Description Oxygen Sensor			
No Pieces: 1	Weight: 1.200 kg	Volume: 0.012 m3	Insurance Value:
Package Description BOX		Invoice Value: 1551.6 USD	
		Dimensions (L x W x H) 0.31m x 0.24m x 0.16m	

Sender's Signature

Date

____/____/____

Received by TNT

Date

____/____/____

Time

____:____ hrs

TNT'S LIABILITY FOR LOSS, DAMAGE AND DELAY IS LIMITED BY THE CMR CONVENTION OR THE WARSAW CONVENTION WHICHEVER IS APPLICABLE. THE SENDER AGREES THAT THE GENERAL CONDITIONS, WHICH CAN BE VIEWED AT [HTTPS://WWW.TNT.COM/TERMS](https://www.tnt.com/terms) , ARE ACCEPTABLE AND GOVERN THIS CONTRACT. IF NO SERVICES OR BILLING OPTIONS ARE SELECTED THE FASTEST AVAILABLE SERVICE WILL BE CHARGED TO THE SENDER.