TOT	INT/ROAD	2
Con No. 241678021 Piece 1 of 1	Weight 0.80kg	Service Economy Express (ND) Options (EDO) EDO
Customer Refere RVM150771-1 S/R Account No	ence 000113678	Origin BA4 Pickup Date 15 Aug 2024
Sender Viamed Limited 15 Station Road cross hills bd207dt GB		Routing KG4 IMR
Receiver Athina Kokkori +0030 210 505005 Bio-Provider 36 Katechaki Ave N.Psychiko Athens 11525 GR		Sort
Postcode / Cluster Code	41	Dest ATH 26 Depot



Delivery instructions:

Consignment Note						
1. From (Collection A	ddress)					
Sender's Account No: 000113678 Name: Viamed Limited Address: 15 Station Road City: cross hills Province: Postal/Zip Code: bd207dt Location: UNITED KINGDOM			 * 2	TNT		
Contact Name: Tel No:	Catherine Green 01535634542			ote this number if you have an enquiry.		
2. To (Receiver Addre	ess)		A. Delivery Address	<u> </u>		
Receiver's Account No Name: Address: City: Province: Postal/Zip Code: Location:	Bio-Provider 36 Katechaki Ave N.Psychiko Athens 11525 GREECE		Name: Address: City: Province: Postal/Zip Code: Location: Contact Name:	Bio-Provider 36 Katechaki Ave N.Psychiko Athens 11525 GREECE Athina Kokkori		
Contact Name: Tel No: 3. Goods	Athina Kokkori +0030 210 505005		Tel No: B. Dutiable Shipme	+0030 210 505005		
General Description: Oxygen Sensors HS Tariff Code: Total Packages: 1 4. Services	Total Weight: 0.800 kg	Total Volume: 0.007 m3	Invoice Value of Duti	Instructions		
Service: (48N) Econom Options: (EDO) EDO	ny Express		D. Customer Reference RVM150771-1	ence		
Payment Terms: Recei	ivor Pave		E. Invoice Receiver (Receiver's Account Number)			
T ayment Terms. Nece	ivei i ays		000111539			
NON DANGEROUS G	OODS					
Sender's Signature: _ Date://			Received by TNT (N	Name):		
TNT'S LIABILITY FOR LOSS, DAMAG WARSAW CONVENTION WHICHEVI CONDITIONS, WHICH CAN BE VIEW GOVERN THIS CONTRACT. IF NO S AVAILABLE SERVICE WILL BE CHA	GE AND DELAY IS LIMITED BY THE ER IS APPLICABLE. THE SENDER , VED AT HTTPS://WWW.TNT.COMT SERVICES OR BILLING OPTIONS A	AGREES THAT THE GENERAL ERMS , ARE ACCEPTABLE AND	Customs Copy Please keep for refer			

Consignment Note						
1. From (Collection A	ddress)					
Sender's Account No: Name: Address: City: Province: Postal/Zip Code: Location:	000113678 Viamed Limited 15 Station Road cross hills bd207dt UNITED KINGDOM		_	TNT 		
Contact Name:	Catherine Green		Please quot	te this number if you have an enquiry.		
Tel No: 2. To (Receiver Addre	01535634542 ess)		A. Delivery Address			
Receiver's Account No Name: Address: City: Province: Postal/Zip Code: Location:			Name: Address: City: Province: Postal/Zip Code: Location:	Bio-Provider 36 Katechaki Ave N.Psychiko Athens 11525 GREECE		
Contact Name: Tel No: 3. Goods	Athina Kokkori +0030 210 505005		Contact Name: Tel No: B. Dutiable Shipmen	Athina Kokkori +0030 210 505005 nt Details		
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Service: (48N) Econom Options: (EDO) EDO	ny Express		RVM150771-1 E. Invoice Receiver ((Receiver's Account Number)		
Payment Terms: Recei	iver Pays		000111539			
NON DANGEROUS G	OODS					
Sender's Signature: _ Date://			Received by TNT (Na	ame): _ Time::		
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Greece

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

Athina Kokkori Contact Name 00302105050054 Contact Tel 00007148

Account Customer Reference

BIOVIAMED26062024

Date 15 Aug 2024 EL099007886 Vat Number Priced In **US Dollars**

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

Invoice RVM150771-1

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

Delivery Reference DVM150771-1 Contact agib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110081 Tariff 9019209000 CoO United States	Teledyne Oxygen Sensor UFO 130-2	1	166.50	0.00	166.50
ooo omea oraro	S/N:179763				
0110453 Tariff 9019209000 CoO United States	Maxtec Oxygen sensor MAX-250MS	9	90.30	0.00	812.70
	S/N:KC60299059,KC60299022-KC60299025				
	KC60299027-KC60299030				
Bank Charges	Bank Charges		45.00	0.00	45.00
EXW	Delivery: EXW - Viamed, UK (Incoterms 2020)		0.00	0.00	0.00
	Consigned to:				
	TNT Account: 000111539				

Total Net: 1,024.20

Total Vat: 0.00

Total: 1,024.20

Banking details Bank Sort Code Account Number

IBAN

Barclays Bank 20-78-42 89771244 GB82BUKB20784289771244

BIC BUKBGB22
Terms & conditions https://www.viamed.co.uk/terms

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.

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	S/N:KC60299059,KC60299022-KC60299025				
	KC60299027-KC60299030				
Bank Charges	Bank Charges		45.00	0.00	45.00
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DETAILED MANIFEST RECEIVER PAYS Pickup id: Web Channel Booking created on: 15 Aug 2024 GMT Shipment Date: 15 Aug 2024 (local time) Service G (48N) Economy Express Options (EDO) EDO **NON DANGEROUS GOODS** Shipment reference **Special Instructions** RVM150771-1 Account: 000113678 Sender Receiver Account: 000111539 Viamed Limited Bio-Provider 15 Station Road 36 Katechaki Ave cross hills N.Psychiko bd207dt Athens UNITED KINGDOM 11525 GREECE Contact: Catherine Green Tel: 01535634542 Contact: Athina Kokkori Tel: +0030 210 505005 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, 11525, GREECE **Goods Description** Oxygen Sensors

No Pieces: 1 Weight: 0.800 kg Volume: 0.007 m3 Insurance Value: Invoice Value: 929.2 USD

 Package Description
 Dimensions (L x W x H)

 BOX
 0.32m x 0.26m x 0.08m

Sender's Signature _____ Date ___/___

Received by TNT

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 , are acceptable and govern this contract. If no services or billing options are selected the fastest available service will be charged to the sender.

Date ____/___ Time ____: ___ hrs

DETAILED MANIFEST RECEIVER PAYS Pickup id: Web Channel Booking created on: 15 Aug 2024 GMT Shipment Date: 15 Aug 2024 (local time) Service G (48N) Economy Express Options (EDO) EDO **NON DANGEROUS GOODS** Shipment reference **Special Instructions** RVM150771-1 Account: 000113678 Sender Receiver Account: 000111539 Viamed Limited Bio-Provider 15 Station Road 36 Katechaki Ave cross hills N.Psychiko bd207dt Athens UNITED KINGDOM 11525 GREECE Contact: Catherine Green Tel: 01535634542 Contact: Athina Kokkori Tel: +0030 210 505005 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, 11525, GREECE **Goods Description** Oxygen Sensors

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Date ____/___ Time ____: ___ hrs