

**Invoice Address**

Medival s.r.l  
Via San Crispino 33  
Padova  
35129  
Italy  
VAT IT01630000287

Delivery Address  
Medival s.r.l  
C/O Warehouse  
Via San Crispino 35  
Padova  
35129  
Italy

Supplier  
Viamed Ltd  
15 Station Road  
Cross Hills  
Keighley, West Yorkshire  
BD20 7DT  
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 Alice Santi  
Contact Tel 39 049.77.54.77  
Account 00006557  
Customer Reference 4000696 A  
Date 27 Jan 2021  
Tracking Number 470759273

**Invoice RVM127110-1**

EXW Ex Works \* Incoterms® 2020

Delivery Reference DVM127110-1 Contact sarah.walton@viamed.co.uk

Item Reference	Description	Quantity	€ Unit	€ Unit Vat	€ Total
0111250 Tariff 90181990-00	Maxtec Oxygen Analyser Handi+	40	133.00	0.00	5,320.00
	S/N:FK44999001-FK44999025,FK59399021-FK59399023 FK59499001-FK59499012				
EXW	(Ex-Works Incoterms 2000). Consigned to: TNT A/C 8235129 Economy Express AWB:470759273		0.00	0.00	0.00

Total Net: € 5,320.00  
Total Vat: € 0.00  
Total: € 5,320.00

Sign

Date 28/1/21

Print Name R

Van Reg. 3509

**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.



Sending Depot    Receiving Depot

1. Sender's Account Number

2. Invoice to Receiver

Receiver's account number

SENDER LIABLE FOR UNPAID CHARGES

3. Customer Reference

4. From (Collection Address)

Name: VIAMED LTD

Address: 15 Station Road  
Cross Hills

City: KEIGHLEY

Province/Region: West Yorkshire

Contact Name: Ryan Swaine

Postal / Zip Code: BD207DT

Location: UNITED KINGDOM

Tel. No.: +44(0)7803907117

5. To (Receiver)

Name: Medival srl

Address: via S. Crispino, 33

City: Padova

Province/Region: PD

Contact Name: Alice Santi

Postal / Zip Code: 35129

Location: ITALY

Tel. No.: 049775477

6. Delivery Address

Name:

Address:

City:

Province/Region:

Contact Name:

Postal / Zip Code:

Location:

Tel. No.:

7. Dangerous Goods

Does this consignment contain any dangerous goods?

Yes ☐ No ☒

CARRIAGE OF THIS CONSIGNMENT IS SUBJECT TO THE TERMS AND CONDITIONS ON THE REVERSE

Your Signature

Date: 27-01-2021 (Day/Month/Year)

Received by JHT

Date:

Time:

GD

470759273



WW

Please quote this Number if you have an enquiry.

8a. Services

Economy Express

Documents ☐

Non-Documents ☒

Priority

Enhanced Liability

For documents and non-documents subject to Terms and Conditions on reverse

9. Special Delivery Instructions

10. Goods Descriptions

General Description	Number of Items	Weight		Dimensions		
		Kilos	Grams	Length	Width	Height
medical devices	1	11	600	61	47	47
medical devices	1	7	200	61	41	38
Stat. No.	Total	2	18	800	Volume: 0.229787	
OPS verify:					Volume Weights:	

11. Dutiable Shipment Details

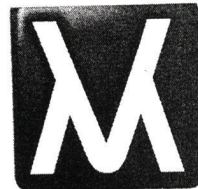
RECEIVER'S VMT / TAX / B/W / RMS / NO.

RECEIVER'S COPY



Viamed Ltd  
15 Station Road  
Cross Hills  
Keighley, West Yorkshire  
BD20 7DT  
Tel: +44 (0) 1535 634542  
Fax: +44 (0) 1535 635582  
Email: info@viamed.co.uk  
VAT Reg No: GB287389593  
Company Reg No: 01291765

Viamed Ltd



Account



Order Barcode



Delivery Address

Medival s.r.l  
C/O Warehouse  
Via San Crispino 35  
Padova  
35129  
Italy

Invoice Address

Medival s.r.l  
Via San Crispino 33  
Padova  
35129  
Italy  
VAT IT01630000287

Contact Name  
Contact Tel

: Alice Santi  
: 39 049.77.54.77

Account  
Customer Reference  
Date  
Priority  
Due Date

00006557  
4000696 A  
10 Nov 2020  
: 2  
: 11 Nov 2020

## Order Confirmation CVM127110

EXW Ex Works \* Incoterms® 2020

Page 1 / 1

Your Viamed Contact for this Order Confirmation : sarah.walton@viamed.co.uk

Item Reference	Description	Quantity	€ Unit	€ Unit Vat	€ Total
0111250	Maxtec Oxygen Analyser Handi+	40 ✓	133.00	0.00	5,320.00
EXW	(Ex-Works Incoterms 2000). Consigned to: TNT A/C 8235129	1	0.00	0.00	0.00

Total Net: € 5,320.00  
Total Vat: € 0.00  
Total: € 5,320.00

PICKED/PACKED: CHECKED:  
DATE: 25-1-2021 DATE:  
INITIALS: cg INITIALS:

WEIGHT:  
VOLUMETRIC WEIGHT:  
DIMENSIONAL WEIGHT:  
DIMENSIONS:

B1	B2
61x47x47cm	61x42x38cm
11.60kg	7.20kg
25 units	15 units

Banking details  
Bank  
Sort Code  
Account Number  
IBAN  
BIC  
Terms and conditions

BIC  
Barclays Bank  
20-78-42  
87399700  
GB33BUKB20784287399700  
BUKGB22  
<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.





## 2. Invoice to Receiver

[illegible]

**X** or call Customer Service for correct account details.

Name: VIAMED LTD

## Cross Hills

Postal / Zip Code: BD207DT

Location: UNITED KINGDOM

Tel. No.: +44(0)7803907117

Name: Medival sri

Postal / Zip Code: 35129

Contact Name: Alice Santi  
Tel. No.: 049775477

Tel.No.: 049775477

Postal / Zip Code:

Location:

Tel. No.:

Does this consignments contain any dangerous goods.

Yes ☐ No ☒

Received by TNT (to be completed by TNT)

[illegible]

470759273



Please quote this Number if you have an enquiry.

**8a. Services (Cross one box only to select a Service)**

**8b. Options (Cross boxes)**

Economy Express

Documents	Non-Documents
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
15	15
16	16
17	17
18	18
19	19
20	20
21	21
22	22
23	23
24	24
25	25
26	26
27	27
28	28
29	29
30	30
31	31
32	32
33	33
34	34
35	35
36	36
37	37
38	38
39	39
40	40
41	41
42	42
43	43
44	44
45	45
46	46
47	47
48	48
49	49
50	50
51	51
52	52
53	53
54	54
55	55
56	56
57	57
58	58
59	59
60	60
61	61
62	62
63	63
64	64
65	65
66	66
67	67
68	68
69	69
70	70
71	71
72	72
73	73
74	74
75	75
76	76
77	77
78	78
79	79
80	80
81	81
82	82
83	83
84	84
85	85
86	86
87	87
88	88
89	89
90	90
91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

Priority handling from pickup to delivery  
For Express and Economy Express

## Enhanced

For documents and non-documents  
subject to Terms and Conditions on  
reverse

Please provide the value details

*Journal of Management Education* 30(6)

**9. Special Delivery Instructions (Reserved for your instructions (if required))**

**10. Goods Descriptions (If dutiable please complete section 11)**

General Description		Number of Items	Weight		Dimensions		
Please put full details on commercial invoice			Kilos	Grams	Length	Width	Height
medical devices	1	11	600	61	47	47	
medical devices	1	7	200	61	41	38	
Stat. No.	Total	2	18	800	Consignment subject to volumetric measurement Please refer to our brochure or call Customer Service		

### 11. Dutiable Shipment Details (Complete for dutiable consignments)

SENDER'S COPY

Please keep for Reference

EUR

5,320.00

www.