

Invoice Address  
Smiths Medical Czech Republic a.s.  
CTPark Hranice  
Olomoucka 306  
Hranice  
753 01  
Czech Republic

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 Patrik Janda  
Contact Tel 420581671171  
Account CID17344  
Customer Reference 470020401  
Date 07 Oct 2021  
Vat Number CZ01651617  
Tracking Number 811628115048  
**Invoice RVM133046-1**

Delivery Address  
Smiths Medical Czech Republic a.s.  
CTPark Hranice  
Olomoucka 306  
Hranice  
753 01  
Czech Republic

EXW Ex Works \* Incoterms® 2020


Delivery Reference DVM133046-1 Contact sarah.walton@viamed.co.uk

Item Reference	Description	Quantity	£ Unit	£ Unit Vat	£ Total
0110017 Tariff 9019200000 CoO United States	Teledyne Oxygen Sensor R-17MED	5	34.00	0.00	170.00
	S/N:617322-617326				
EXW	Delivery: EXW - Viamed UK (Incoterms 2020)		0.00	0.00	0.00

Fedex account: 919374454

AWB:811628115048

Total Net: £ 170.00  
Total Vat: £ 0.00  
Total: £ 170.00

Driver 

Sign Daniel

Date 8/10/21

Print Name DANIEL

Van Reg. 1CR60NHG.

Banking details

Bank Barclays Bank PLC  
Sort Code 20-78-42  
Account Number 00906662  
IBAN GB05BUKB20784200906662  
BIC BUKGB22

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 7 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.



International Air Waybill

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1 From Please print and press hard.

Sender's FedEx Account Number **SENDER'S ACCOUNT ONLY**

Date **7-10-2021**

Sender's Name **Cathy Green** Phone **01535 654342**

Company **Viamed Limited**

Address **15 Station Road**

City **Cross Hills** State **BD20 7DT**

Country **UK** Postal Code **BD20 7DT**

Email **info@viamed.co.uk**

Sender's VAT/URN Number **GB2287389593**

Internal Billing Reference **EUR1133046-1 APPEAR ON INVOICE**

2 To

Recipient's Name **Patric Janda** Residential Delivery ☐

Company **Smiths Medical Czech Republic a.s**

Address **CTPARK Hranice**

City **Olomoucka 306** State **Hranice**

Country **Czech Republic** ZIP **75301**

Email **Patric.janda@smiths-medical.com**

Recipient's Tax ID Number **CZE1651617 AS LOCALLY REQUIRED**

3 Shipment Information

Total Packages **1** Total Weight **0.60** lbs. ☐ kg ☒ **23/15/15** in. ☐ cm

Commodity Description **Oxygen sensors** Harmonised Code **901920000** Country of Manufacture **USA** Value for Customs **£**

DETAIL REQUIRED. PRINT IN ENGLISH. **(E17-MED 0110017)** **USA 170.00**

Total Declared Value for Carriage (Specify Currency) **£170.00**

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000DX148

Senders Copy

The service order has changed in Section 4. Signature options have been added to Section 6.

For Completion Instructions, and details on services and options, see back of fifth page.

FedEx Tracking Number **8116 2811 5048** Form ID No. **0460**

4 Express Package Service ☐ FedEx Int'l Priority ☐ FedEx Europe First ☐ FedEx Int'l First ☒ FedEx Int'l Economy

5 Packaging ☐ FedEx Envelope ☐ FedEx Pak ☐ FedEx Box ☒ Other **Box**

6 Special Handling and Delivery Signature Options ☐ HOLD at FedEx location ☐ SATURDAY Delivery ☐ Direct Signature ☐ Indirect Signature

7 Payment ☐ Bill transportation charges to: ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Cheque

8 Required Signature ☐ Sender's Signature: **CGREEN**

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