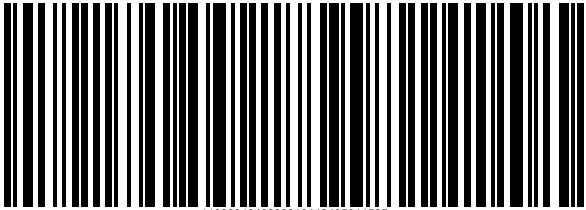
		INT/ROAD		<div></div>		2	
Con No. 394642830				Service Economy Express (ND)			
Piece 1 of 1		Weight 1.30kg		Options (EDO) EDO			
Customer Reference BIOVIAMED20042022				Origin BA4 Pickup Date 23 Jun 2022			
S/R Account No 000113678							
Sender Viamed Limited 15 Station Road cross hills bd207dt GB				Routing DZ5 MV9			
Receiver Clio Kouroumalou 00302105050054 Bio-Provider 36 Katechaki Ave N.Psychiko Athens 11525 GR				Sort			
Postcode / Cluster Code		41		Dest Depot		ATH 1	
Delivery instructions:							



1100394642830010448435011525

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: 11525
Location: GREECE

Contact Name: Clio Kouroumalou
Tel No: 00302105050054

3. Goods

General Description:

Medical Products

HS Tariff Code:

Total Packages:	Total Weight:	Total Volume:
1	1.300 kg	0.010 m3

4. Services

Service: (48N) Economy Express

Options: (EDO) EDO

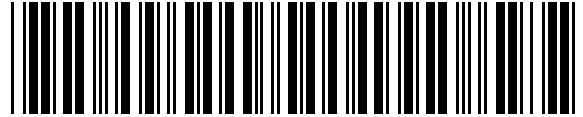
Payment Terms: Receiver Pays

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.



* 3 9 4 6 4 2 8 3 0 *

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: 11525
Location: GREECE

Contact Name: Clio Kouroumalou
Tel No: 00302105050054

B. Dutiable Shipment Details

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

Invoice Value of Dutiables: 1794 USD

C. Special Delivery Instructions

D. Customer Reference

BIOVIAMED20042022

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: 11525
Location: GREECE

Contact Name: Clio Kouroumalou
Tel No: 00302105050054

3. Goods

General Description:
Medical Products
HS Tariff Code:
Total Packages: Total Weight: Total Volume:
1 1.300 kg 0.010 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 9 4 6 4 2 8 3 0 *

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: 11525
Location: GREECE

Contact Name: Clio Kouroumalou
Tel No: 00302105050054

B. Dutiable Shipment Details

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

C. Special Delivery Instructions

D. Customer Reference

BIOVIAMED20042022

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 Clio Kouroumalou
Contact Tel 00302105050054
Account 00007148
Customer Reference BIOVIAMED20042022
Date 23 Jun 2022
Vat Number EL099007886

Invoice RVM136593-1

EXW Ex Works Greece * Incoterms® 2020

Delivery Reference DVM136593-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	\$ Unit	\$ Unit Vat	\$ Total
0110453 Tariff 9019209000 CoO United States	Maxtec Oxygen sensor MAX-250MS S/N:HD20099001-HD20099010,HE89699001-HE89699015	25	69.00	0.00	1,725.00
BC Tariff 90181990-00	Bank Charges		45.00	0.00	45.00
EXW	Delivery: EXW - Viamed UK (Incoterms 2020) Consigned to TNT account 000111539 Shipped with RVM137732-1		0.00	0.00	0.00

Total Net: \$ 1,770.00
Total Vat: \$ 0.00
Total: \$ 1,770.00

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 Clio Kouroumalou
Contact Tel 00302105050054
Account 00007148
Customer Reference BIOVIAMED20042022
Date 23 Jun 2022
Vat Number EL099007886

Invoice RVM136593-1

EXW Ex Works Greece * Incoterms® 2020

Delivery Reference DVM136593-1 Contact kate.griffiths@viamed.co.uk

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BC Tariff 90181990-00	Bank Charges		45.00	0.00	45.00
EXW	Delivery: EXW - Viamed UK (Incoterms 2020) Consigned to TNT account 000111539 Shipped with RVM137732-1		0.00	0.00	0.00

Total Net: \$ 1,770.00
Total Vat: \$ 0.00
Total: \$ 1,770.00

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Sort Code 20-78-42
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IBAN GB82BUKB20784289771244
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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
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15 Station Road
Cross Hills
Keighley, West Yorkshire
BD20 7DT, United Kingdom
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VAT Reg No: GB287389593
Company Reg No: 01291765
Eori No: GB287389593000



Contact Name Clio Kouroumalou
Contact Tel 00302105050054
Account 00007148
Customer Reference BIOVIAMED20042022
Date 23 Jun 2022
Vat Number EL099007886

Invoice RVM136593-1

EXW Ex Works Greece * Incoterms® 2020

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Item Reference	Description	Quantity	\$ Unit	\$ Unit Vat	\$ Total
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BC Tariff 90181990-00	Bank Charges		45.00	0.00	45.00
EXW	Delivery: EXW - Viamed UK (Incoterms 2020) Consigned to TNT account 000111539 Shipped with RVM137732-1		0.00	0.00	0.00

Total Net: \$ 1,770.00
Total Vat: \$ 0.00
Total: \$ 1,770.00

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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
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VAT Reg No: GB287389593
Company Reg No: 01291765
Eori No: GB287389593000



Contact Name Clio Kouroumalou
Contact Tel 00302105050054
Account 00007148
Customer Reference BIOVIAMED20042022
Date 23 Jun 2022
Vat Number EL099007886

Invoice RVM136593-1

EXW Ex Works Greece * Incoterms® 2020

Delivery Reference DVM136593-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	\$ Unit	\$ Unit Vat	\$ Total
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BC Tariff 90181990-00	Bank Charges		45.00	0.00	45.00
EXW	Delivery: EXW - Viamed UK (Incoterms 2020) Consigned to TNT account 000111539 Shipped with RVM137732-1		0.00	0.00	0.00

Total Net: \$ 1,770.00
Total Vat: \$ 0.00
Total: \$ 1,770.00

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>

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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 Clio Kouroumalou
Contact Tel 00302105050054
Account 00007148
Customer Reference BIOVIAMED21062022
Date 23 Jun 2022
Vat Number EL099007886

Invoice RVM137732-1

EXW Ex Works Greece * Incoterms® 2020

Delivery Reference DVM137732-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	\$ Unit	\$ Unit Vat	\$ Total
0110425 Tariff 9019209000 CoO United States	Maxtec Oxygen Sensor MAX-250 with `O` ring	1	69.00	0.00	69.00
	S/N:FK70999143				
Bank Charges	Bank Charges		45.00	0.00	45.00
EXW	Delivery: EXW - Viamed UK (Incoterms 2020) Consigned to TNT account 000111539 Shipped with RVM136593-1		0.00	0.00	0.00

Total Net: \$ 114.00
Total Vat: \$ 0.00
Total: \$ 114.00

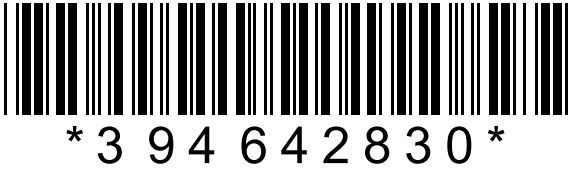
Banking details
Bank Barclays Bank
Sort Code 20-78-42
Account Number 89771244
IBAN GB82BUKB20784289771244
BIC BUKGBB22
Terms & conditions <https://www.viamed.co.uk/terms>

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DETAILED MANIFEST

RECEIVER PAYS

Pickup id: Web Channel
Printed on: 23 Jun 2022
Shipment Date: 23 Jun 2022



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

NON DANGEROUS GOODS

Special Instructions

Shipment reference
BIOVIAMED20042022

Sender Account: 000113678

Viamed Limited
15 Station Road
cross hills
bd207dt
UNITED KINGDOM

Contact: Catherine Green
Tel: 01535634542

Receiver Account: 000111539

Bio-Provider
36 Katechaki Ave
N.Psychiko
Athens
11525
GREECE

Contact: Clio Kouroumalou
Tel: 00302105050054
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 Medical Products

No Pieces: 1 Weight: 1.300 kg Volume: 0.010 m3 Insurance Value: Invoice Value: 1794 USD

Package Description BOX Dimensions (L x W x H)
0.32m x 0.26m x 0.12m

Sender's Signature _____ Date ____/____/____

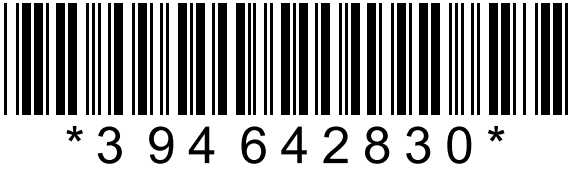
Received by TNT _____ Date ____/____/____ Time ____:____ hrs

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DETAILED MANIFEST

RECEIVER PAYS

Pickup id: Web Channel
Printed on: 23 Jun 2022
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Service Options G (48N) Economy Express (EDO) EDO

NON DANGEROUS GOODS

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Viamed Limited
15 Station Road
cross hills
bd207dt
UNITED KINGDOM

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36 Katechaki Ave
N.Psychiko
Athens
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GREECE

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