

Viamed Ltd
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 Email: info@viamed.co.uk
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Viamed Ltd



Delivery Address

Medical Service PC
 Davaki 3-5
 Ampelokipi
 Athens
 11526
 Greece

Invoice Address

Medical Service PC
 Davaki 3-5
 Ampelokipi
 Athens
 11526
 Greece

Contact Name Contact Tel

: Theodoros Doukas
 : 00302106917478

Account

CID22507

Customer Reference

1/2024

Date

10 May 2024

Priority

3

Valid until

: 09 Jun 2024

Priced In

Euros

Proforma Invoice MVM149844

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CIP Carriage and Insurance Paid To Medical Service PC, Greece * Incoterms(R) 2020

Your Viamed Contact for this Proforma Invoice : sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
4310007 Tariff 9018199000 CoO Germany	SpiroTrue A - Single use flow sensor. Box of 5 Ref. 1030132006	10	60.00		600.00
4310009 Tariff 90181990000 CoO Germany	SpiroTrue H - Single use flow sensor Box of 6 Ref. 1030132000	8	39.00		312.00
INS	Insurance	1	11.50		11.50
PPUPS6	UPS Courier Delivery - Standard 61 x 47 x 33cm 9.2kg	1	22.55		22.55

Total Net: 946.05
 Total Vat: 0.00
 Total: 946.05

Banking details
 Bank BIC
 Sort Code Barclays Bank
 Account Number 20-78-42
 IBAN 87399700
 BIC GB33BUKB20784287399700
 Terms and conditions BUKBGB22
<https://www.viamed.co.uk/terms>

Full proforma 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.
 Proforma Valid for 30 days only.
 Viamed Ltd reserves the right to add an administration
 fee to the Proforma if multiple changes are requested.