

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

Viamed Ltd



Delivery Address

Hospitex Diagnostics Kaunas
Simno G.4
Kaunas
LT-46365
Lithuania

Invoice Address

Hospitex Diagnostics Kaunas
Simno G.4
Kaunas
LT-46365
Lithuania
VAT LT107474219

Contact Name

Contact Tel

: Tomas Desceras

: 37037363056

Account

Customer Reference

Date

Priority

Valid until

Priced In

00006090

14012894AM

14 Jan 2025

3

: 14 Feb 2025

Euros

Proforma Invoice MVM154422

Page 1

CIP Carriage and Insurance Paid To Hospitex Diagnostics Kaunas, Lit * Incoterms(R) 2020

Your Viamed Contact for this Proforma Invoice : aqib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110017 Tariff 901920900 CoO United States	Teledyne Sensor R-17MED	2	45.70		91.40
0110081 Tariff 9019209000 CoO United States	Teledyne Oxygen Sensor UFO 130-2	3	158.60		475.80
0110022 Tariff 9019209000 CoO United States	Teledyne Oxygen Sensor R-22MED	3	37.70		113.10
INS	Insurance	1	11.50		11.50
PPUPS6	UPS Courier Delivery - Standard	1	18.74		18.74

32 x 24 x 16cm

0.8kg

Total Net: 710.54

Total Vat: 0.00

Total: 710.54

Banking details

Bank

Sort Code

Account Number

IBAN

BIC

Terms and conditions <https://www.viamed.co.uk/terms>

BIC

Barclays Bank

20-78-42

87399700

GB33BUKB20784287399700

BUKBGB22

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.