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Viamed Ltd



Delivery Address

Michael Smith **DCHS** Cavendish Hospital

Manchester Road **Buxton SK17 6TE**

Invoice Address

Michael Smith **DCHS**

Cavendish Hospital Manchester Road **Buxton**

SK17 6TE

Contact Name Contact Tel

: Michael Smith : 07539615374

Account Customer Reference Date

CID31929 VIAWEB1174 05 Feb 2025

Priority 3

Valid until : 08 Mar 2025 **UK Pounds** Priced In

Proforma Invoice MVM154860

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CIP Carriage and Insurance Paid To Cavendish Hospital, UK * Incoterms(R) 2020

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

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110017	Teledyne Sensor R-17MED	1	54.40	10.88	65.28
PPUPS1	UPS Courier Delivery - Standard	1	0.00	0.00	0.00

Total Net: 54.40 Total Vat: 10.88

Total: 65.28

Banking details

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

BIC BUKBGB22
Terms and conditions 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.