Viamed Ltd
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Cross Hills
Keighley, West Yorkshire
BD20 7DT, United Kingdom
Tel: +44 (0) 1535 634542
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Email: info@viamed.co.uk
VAT Reg No: GB287389593
Company Reg No: 01291765
Eori No: GB287389593000

Viamed Ltd

Delivery Address

WQL MED Kft
Kapolna U.8
Szeged
6724
Hungary

Invoice Address

WQL MED Kft
6724 Szeged
Kapolna U.8
Szeged
6724
Hungary
VAT HU14306938

Contact Name : Betti Seredi
Contact Tel : 0036303395696

Account	00006481
Customer Reference	5200094
Date	04 Apr 2025
Priority	3
Valid until	: 05 May 2025
Priced In	Euros

Proforma Invoice MVM156060

CIP Carriage and Insurance Paid To WQL MED Kft, Hungary * Incoterms(R) 2020

Your Viamed Contact for this Proforma Invoice : kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
4310009 Tariff 9018199000 CoO Germany	SpiroTrue H - Single use flow sensor Box of 6 Ref. 1030132000	50	39.00		1,950.00
INS	Insurance	1	19.50		19.50
PPUPS6	UPS Courier Delivery - Standard	1	0.00		0.00

Total Net:	1,969.50
Total Vat:	0.00
Total:	1,969.50

Banking details	BIC
Bank	Barclays Bank
Sort Code	20-78-42
Account Number	87399700
IBAN	GB33BUKB20784287399700
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.