

Viamed Ltd
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Viamed Ltd



Delivery Address

SaVia Medical GmbH
 Walter-Kohn-Strasse 1a
 Leipzig
 04356
 Germany

Invoice Address

SaVia Medical GmbH
 Walter-Kohn-Strasse 1a
 Leipzig
 04356
 Germany

Contact Name Contact Tel

: Susanne Schumann
 : 034152027822

Account

CID31668

Customer Reference

BL018495/JP

Date

21 May 2025

Priority

3

Valid until

: 08 Jun 2025

Priced In

Euros

Proforma Invoice MVM156657

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CIP Carriage and Insurance Paid To SaVia Medical GmbH, Germany * Incoterms(R) 2020

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

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1410000 Tariff 90318080-00 CoO U.K.	Foetal Heart Simulator V1000 Due Date 08 May 2025	1	790.80	0.00	790.80
INS	Insurance	1	11.50	0.00	11.50
PPUPS6	UPS Courier Delivery - Standard 32 x 26 x 12 cm 1.2 kg	1	13.58	0.00	13.58
				Total Net:	815.88
				Total Vat:	0.00
				Total:	815.88

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