

Viamed Ltd
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Company Reg No: 01291765
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Viamed Ltd



Delivery Address

Briones-Pulmoncare
TMA 03498
8988 NW 105th Way
Medley
Florida
33178-1340
United States

Invoice Address

Briones-Pulmoncare
TMA 03498
8988 NW 105th Way
Medley
Florida
33178-1340
United States

Contact Name : Killen Briones Claudett
Contact Tel : 00159389097152

Account CID31902
Customer Reference 17062538CH
Date 17 Jun 2025
Priority 3
Valid until : 18 Jul 2025
Priced In US Dollars

Proforma Invoice MVM157368

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CIP Carriage and Insurance Paid To Briones-Pulmoncare, Florida, USA * Incoterms(R) 2020

Your Viamed Contact for this Proforma Invoice : catrin.hollings@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110081 Tariff 9019209000 CoO United States	Teledyne Oxygen Sensor UFO 130-2	2	214.00	0.00	428.00
INS	Insurance	1	12.50	0.00	12.50
Bank Charges	Bank Charges	1	25.00	0.00	25.00
PPUPS7	UPS Courier Delivery - Express Saver	1	49.35	0.00	49.35
	23 x 15 x 12cm 0.2kg				

Total Net: 514.85
Total Vat: 0.00
Total: 514.85

Banking details BIC
Bank Barclays Bank
Sort Code 20-78-42
Account Number 89771244
IBAN GB82BUKB20784289771244
BIC BUKGB22
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.