

Viamed Ltd  
 15 Station Road  
 Cross Hills  
 Keighley, West Yorkshire  
 BD20 7DT, United Kingdom  
 Tel: +44 (0) 1535 634542  
 Fax: +44 (0) 1535 635582  
 Email: info@viamed.co.uk  
 VAT Reg No: GB287389593  
 Company Reg No: 01291765  
 Eori No: GB287389593000

# Viamed Ltd



## Delivery Address

SUCH Armazem Lisboa  
 Parque De Saude De Lisboa  
 Av. Brasil, 53  
 Pavilhao 33-A  
 Lisbon  
 1749-003  
 Portugal

## Invoice Address

SUCH - Servico De Utilizacao  
 Comum Dos Hospitais  
 Avenida Do Brasil  
 53 Pavilhao 33A  
 Lisbon  
 1749-003  
 Portugal  
 VAT PT500900469

## Contact Name Contact Tel

: Marisa Pereira  
 : 239798635

## Account

00007138

## Customer Reference

NE2025/34074

## Date

15 Sep 2025

## Priority

3

## Valid until

15 Oct 2025

## Priced In

Euros

Page 1

## Proforma Invoice MVM158236

CIP Carriage and Insurance Paid To SUCH Hospitais, Portugal \* Incoterms(R) 2020

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

| Item Reference                                    | Description                     | Quantity | Unit  | Unit Vat | Total  |
|---------------------------------------------------|---------------------------------|----------|-------|----------|--------|
| 0110057<br>Tariff 9019209000<br>CoO United States | Teledyne Oxygen Sensor T-7      | 4        | 64.50 | 0.00     | 258.00 |
| INS                                               | Insurance                       | 1        | 11.50 | 0.00     | 11.50  |
| PPUPS6                                            | UPS Courier Delivery - Standard | 1        | 16.19 | 0.00     | 16.19  |
|                                                   | 23 x 15 x 15 cm<br>0.50kg       |          |       |          |        |

Total Net: 285.69

Total Vat: 0.00

Total: 285.69

Banking details  
 Bank BIC  
 Sort Code Barclays Bank  
 Account Number 20-78-42  
 IBAN 87399700  
 BIC GB33BUKB20784287399700  
 Terms and conditions BUKGB22  
<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.