

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

Mr. Elias Moussa residence
69 1st Flr. Elias Makhlouf
Jouret El Ballout
Broumana
Lebanon

Invoice Address

S And S MED
Ground Floor
Maroun Nassif Building
Ain Deleb Street
Saïda
Lebanon

Contact Name Contact Tel

: Mary Antoun
: 0096103482874

Account

CID19552

Customer Reference

25102025

Date

11 Sep 2025

Priority

3

Valid until

10 Oct 2025

Priced In

US Dollars

Page 1

Proforma Invoice MVM158905

CIP Carriage and Insurance Paid To S And S MED, Lebanon * Incoterms(R) 2020

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

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110040 Tariff 9019209000 CoO Germany	Viamed Oxygen Sensor R-30V Due Date 10 Sep 2025	7	70.00	0.00	490.00
0110022 Tariff 9019209000 CoO United States	Teledyne Oxygen Sensor R-22MED Due Date 10 Sep 2025	20	39.50	0.00	790.00
0110039 Tariff 9019209000 CoO Germany	Viamed Oxygen Sensor R-22VA Due Date 10 Sep 2025	6	40.00	0.00	240.00
0110049 Tariff 90271090 CoO Germany	Viamed Oxygen Sensor R-49V Due Date 10 Sep 2025	6	37.75	0.00	226.50
0110019 Tariff 90271090 CoO Germany	Viamed Oxygen Sensor R-17Vi Due Date 10 Sep 2025	5	32.50	0.00	162.50
4310007 Tariff 9018199000 CoO Germany	SpiroTrue A - Single use flow sensor. Box of 5 Ref. 1030132006 Due Date 10 Sep 2025	10	60.00	0.00	600.00

Banking details
Bank
Sort Code
Account Number
IBAN
BIC

BIC
Barclays Bank
20-78-42
89771244
GB82BUKB20784289771244
BUKGBB22

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.

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Proforma Invoice MVM158905

CIP Carriage and Insurance Paid To S And S MED, Lebanon * Incoterms(R) 2020

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110429 Tariff 9019209000 CoO United States	Maxtec Oxygen Sensor MAX-250E Due Date 10 Sep 2025	5	60.10	0.00	300.50
Bank Charges	Bank Charges	1	25.00	0.00	25.00
INS	Insurance	1	34.09	0.00	34.09
PPUPS7	UPS Courier Delivery - Express Saver 61 x 47 x 33cm 7.80 kg	1	223.61	0.00	223.61

Total Net: 3,092.20
Total Vat: 0.00
Total: 3,092.20

Banking details

Bank
Sort Code
Account Number
IBAN
BIC
Terms and conditions

BIC

Barclays Bank
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89771244
GB82BUKB20784289771244
BUKBGB22
<https://www.viamed.co.uk/terms>

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