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Viamed Ltd



Delivery Address

Kosov Alexey
 Groote Wischen 6
 Hamburg
 21147
 Germany

Invoice Address

Medtrest LLC
 568 Rolling Hills Dr
 Ozark
 Alabama
 36360
 United States

Contact Name Contact Tel

: Kosov Alexey
 : 004917662152557

Account

CID19267

Customer Reference

24092584KG2

Date

25 Sep 2025

Priority

3

Valid until

25 Oct 2025

Priced In

Euros

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Proforma Invoice MVM159189

CIP Carriage and Insurance Paid To Medtrest LLC, USA * 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 Due Date 24 Sep 2025	100	39.00	0.00	3,900.00
INS	Insurance	1	39.00	0.00	39.00
PPUPS6	UPS Courier Delivery - Standard 4 x 61 x 47 x 47 cm 22 kg each box	1	67.91	0.00	67.91

Total Net: 4,006.91
 Total Vat: 0.00
 Total: 4,006.91

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.