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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

: Kosov Alexey

: 004917662152557

Account : CID19267
 Customer Reference : 16122584KG
 Date : 17 Dec 2025
 Priority : 3

Valid until : 16 Jan 2026
 Priced In : Euros

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Proforma Invoice MVM160746

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	100	39.00	0.00	3,900.00

INS	Insurance	1	39.00	0.00	39.00
PPUPPS6	UPS Courier Delivery - Standard	1	66.80	0.00	66.80

4 x 61 x 47 x 47 cm

22 kg each box

Total Net: 4,005.80
 Total Vat: 0.00
 Total: 4,005.80

Banking details
 Bank : Barclays Bank
 Sort Code : 20-78-42
 Account Number : 87399700
 IBAN : GB33BUKB20784287399700
 BIC : BUKBGB22
 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.