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Viamed Ltd



Delivery Address

Mazabuka General Hospital
P.O.Box 670060
Livingstone Road
Mazabuka
Zambia

Invoice Address

Mazabuka General Hospital
P.O.Box 670060
Livingstone Road
Mazabuka
Zambia

Contact Name Contact Tel

: Gilbert Kalunga
: 00260972842227

Account

CID35709

Customer Reference

08012651SL

Date

08 Jan 2026

Priority

3

Valid until

08 Feb 2026

Priced In

US Dollars

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Proforma Invoice MVM161111

CIP Carriage and Insurance Paid To Mazabuka General Hospital,Zambia * Incoterms(R) 2020

Your Viamed Contact for this Proforma Invoice : sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110022 Tariff 9019209000 CoO United States	Teledyne Oxygen Sensor R-22MED	1	50.80	0.00	50.80
INS	Insurance	1	12.50	0.00	12.50
BC	Bank Charges	1	25.00	0.00	25.00
PPUPS7	UPS Courier Delivery - Express Saver	1	71.27	0.00	71.27
	23 x 15 x 12 cm				
	0.2 kg				

Total Net: 159.57
Total Vat: 0.00
Total: 159.57

Banking details
Bank BIC
Sort Code Barclays Bank
Account Number 20-78-42
IBAN 89771244
BIC GB82BUKB20784289771244
Terms and conditions BUKBGB22
<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.