

Viamed Ltd
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VAT Reg No: GB287389593
Company Reg No: 01291765
Eori No: GB287389593000

Viamed Ltd



Delivery Address

Sorimpeksas UAB
Siauliu Str. 16A
Kaunas
LT-44353
Lithuania

Invoice Address

Sorimpeksas UAB
Siauliu Str. 16A
Kaunas
LT-44353
Lithuania
VAT LT357332412

Contact Name : Paulius Eglinskas
Contact Tel : 0037037361766

Account CID22803
Customer Reference 28042026SL
Date 29 Apr 2026
Priority 3

Valid until 28 May 2026
Priced In Euros

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Proforma Invoice MVM162528

CIP Carriage and Insurance Paid To Sorimpeksas, Lithuania * Incoterms 2020

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

Item Reference	Description	Quantity	Unit	Unit Vat	Total
4420919 Tariff 9018199000 CoO Germany	VersaStream Oridion CO2/O2 Sampling Line Oral/Nasal, Adult, Long-term Box of 10	5	83.00	0.00	415.00
4420920 Tariff 9018199000 CoO Germany	VersaStream Oridion CO2/O2 Sampling Line Oral/Nasal, Paediatric, Long-term Box of 10	5	83.00	0.00	415.00
INS	Insurance	1	11.50	0.00	11.50
PPUPS6	UPS Courier Delivery - Standard 64 x 50 x 37 cm 11 kg	1	28.00	0.00	28.00

Total Net: 869.50
Total Vat: 0.00
Total: 869.50

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