



Viamed Ltd  
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# Viamed Ltd

**Delivery Address**

BASICS Devon  
 28 Buckwell  
 Wellington  
 Somerset  
 TA21 8TA

**Invoice Address**

BASICS Devon  
 Treasurer  
 PO Box 165  
 Plymouth  
 Devon  
 PL7 9BJ

**Contact Name** : Conor Calby  
**Contact Tel** : 07973272299

**Account** CID34187  
**Customer Reference** 05052652SL  
**Date** 05 May 2026  
**Priority** 3

**Valid until** 05 Jun 2026  
**Priced In** UK Pounds

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## Proforma Invoice MVM163349

CIP Carriage and Insurance Paid To BASICS Devon, UK \* Incoterms 2020

Your Viamed Contact for this Proforma Invoice : [sophie.lines@viamed.co.uk](mailto:sophie.lines@viamed.co.uk)

Item Reference	Description	Quantity	Unit	Unit Vat	Total
4420815	VersaStream Viamed CO2/O2 Sampling Line Oral/Nasal, Adult, Short-term Box of 10	1	93.80	0.00	93.80
PPUPS1	UPS Courier Delivery - Standard	1	12.00	0.00	12.00

**Total Net:** 105.80  
**Total Vat:** 0.00  
**Total:** 105.80

**Banking details**  
 Bank BIC  
 Sort Code Barclays Bank PLC  
 Account Number 20-78-42  
 IBAN 00906662  
 BIC GB05BUKB20784200906662  
 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.