Viamed Ltd
15 Station Road
Cross Hills
Keighley, West Yorkshire
BD20 7DT, United Kingdom
Tel: +44 (0) 1535 634542
Fax: +44 (0) 1535 635582
Email: info@viamed.co.uk
VAT Reg No: GB287389593
Company Reg No: 01291765
Eori No: GB287389593000

Viamed Ltd

Delivery Address

E-Medical BV
De Overmaat 33 D
Arnhem
6831 AE
Netherlands

Invoice Address

E-Medical BV
De Overmaat 33 D
Arnhem
6831 AE
Netherlands

Contact Name : Bas Van Balen
Contact Tel : 0306622700

Account CID37151
Customer Reference 20452694AM
Date 20 Aug 2026
Priority 3

Valid until 20 Sep 2026
Priced In Euros

Proforma Invoice MVM165418

CIP Carriage and Insurance Paid To E-Medical, Netherlands * Incoterms 2020

Your Viamed Contact for this Proforma Invoice : aqib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1410000 Tariff 90318080-00 CoO U.K.	Foetal Heart Simulator V1000	1	514.10	0.00	514.10
INS	Insurance	1	11.50	0.00	11.50
PPUPS6	UPS Courier Delivery - Standard 32 x 24 x 12cm 1.2kg	1	16.00	0.00	16.00

Total Net: 541.60
Total Vat: 0.00
Total: 541.60

Banking details BIC
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.