



INVOICE			
Date	Number	Type	Page
4/19/2023	371840	SO Invoice	1
Customer PO :		PVM3118	Currency Code:

SOLD TO
 VIAMED
 15 STATION RD
 CROSS HILLS, KEIGHLEY
 WEST YORKSHIRE, BD20 7DT
 GB

Sales Order ID: 325601
Confirm To: STEPHEN NIXON
Attention:

Reference: **Sales Rep:** SP

Region: OEIT **Order Class:** R **Order Entry:** AW

BILL TO
 VIAMED
 15 STATION RD
 CROSS HILLS, KEIGHLEY
 WEST YORKSHIRE, BD20 7DT
 GB

Bill To Phone: 44-153-563-4542
Bill To Fax: 44-153-563-5582
Resale Number:

Ship Via: SEE NOTES
FOB: SHIPPING POINT
Freight Terms: Collect
Terms: NET 45 DAYS

Paying by Check? Maxtec recommends ACH.
 Use our BOA Routing /Account: 071000039 / 8670519070
 send remittance details to accountng@maxtec.com

LINE	DESCRIPTION	U/M	ORDER QUANTITY	UNIT PRICE	DISC
PART ID	CUSTOMER PART ID	SHIP DATE	SHIPPED QUANTITY	EXTENSION	TAX
1	REPLACEMENT KIT, FLOW VALVE AND KNOB (LOW	EA	15.0000	38.56	
R211P30-001		4/19/2023	15.0000	578.34	N
Lot IDs:					
114353					
114623					
2	REPLACEMENT KIT, OXYGEN VALVE & KNOB (MID	EA	15.0000	41.96	
R211P30-002		4/19/2023	15.0000	629.40	N
Lot IDs:					
114501					
114925					
3	VALVE, HIGH FLOW	EA	15.0000	19.53	
RP15P09		4/19/2023	15.0000	292.95	N
Lot IDs:					
061621					
4	O-RING. .185 ID X 3/32 OD EPDM A70 DURO	EA	20.0000	1.87	
RP56P02-901		4/19/2023	20.0000	37.40	N
Lot IDs:					
080621					
5	FREIGHT CHARGE	EA	0.0000	0.00	
		4/19/2023	0.0000	0.00	N

PLEASE USE CORRECT HTS CODE FOR PARTS ON ORDER!! IF YOU DON'T HAVE THEM GET FROM ROBERT.

PLEASE SEND ALL UPS NOTIFICATIONS TO cathy.green@viamed.co.uk. THANK YOU.

SHIPPING NOTES: SHIP UPS INT'L EXPED. COLLECT TO UPS ACCT. 9W9-638
 "Do not use any box larger than 20x20x15
 TEL: 440-153-563-4542



INVOICE			
Date	Number	Type	Page
4/19/2023	371840	SO Invoice	2
Customer PO :		PVM3118	Currency Code:

SOLD TO
VIAMED
15 STATION RD
CROSS HILLS, KEIGHLEY
WEST YORKSHIRE, BD20 7DT
GB
M5755

Sales Order ID: 325601
Confirm To: STEPHEN NIXON
Attention:
Reference: Sales Rep: SP
Region: OEIT Order Class: R Order Entry: AW

BILL TO
VIAMED
15 STATION RD
CROSS HILLS, KEIGHLEY
WEST YORKSHIRE, BD20 7DT
GB
M5755

Bill To Phone: 44-153-563-4542
Bill To Fax: 44-153-563-5582
Resale Number:
Ship Via: SEE NOTES
FOB: SHIPPING POINT
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***** PLEASE SHIP NO LESS THAN 48 MAXO2 AE'S IF PARTIAL IS SHIPPED *****

WHEN SHIPPING (ME) PLEASE ADD EXTRA PACKING ALL AROUND PRODUCT

Certificate of Conformance

Maxtec hereby certifies that the manufactured by product(s) delivered herewith is/are in conformance with all terms, conditions and requirements of the purchase order and product model number(s) referenced above. Objective evidence of inspection, testing and certifications are on file at Maxtec and may be reviewed as requested.

Quality Inspection Approval Stamp and Signature:

INVOICE SUBTOTAL	DISC %	DISC AMT	TAX AMT	VAT AMT	FREIGHT AMT	INVOICE TOTAL
1,538.09						1,538.09