



INVOICE			
Date	Number	Type	Page
6/16/2023	374572	SO Invoice	1
Customer PO :		PVM3190	Currency Code:

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

M5755

**Sales Order ID:** 327272  
**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  
**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](mailto:accountng@maxtec.com)

LINE	DESCRIPTION	U/M	ORDER QUANTITY	UNIT PRICE	DISC
PART ID	CUSTOMER PART ID	SHIP DATE	SHIPPED QUANTITY	EXTENSION	TAX
1	ANALYZER, MAXO2+ AE MEDICAL	EA	10.0000	292.11	
R217P72		6/9/2023	10.0000	2,921.10	N
<b>Serial Numbers:</b>					
JC48999011	JC48999012	JC48999013	JC48999019		
JC48999009	JC48999005	JC48999004	JC48999003		
JC48999002	JC48999001				
<b>Lot IDs:</b>					
JC48999					
2	FREIGHT CHARGE	EA	0.0000	0.00	
		6/14/2023	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](mailto: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

\*\*\*\*\* 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:

**Tracking Number:**  
 1Z8412986741928383

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LINE	DESCRIPTION	U/M	ORDER QUANTITY	UNIT PRICE	DISC
PART ID	CUSTOMER PART ID	SHIP DATE	SHIPPED QUANTITY	EXTENSION	TAX

INVOICE SUBTOTAL	DISC %	DISC AMT	TAX AMT	VAT AMT	FREIGHT AMT	INVOICE TOTAL
2,921.10						2,921.10