

SOLD TO

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

M5755

5 Sales Order ID: Confirm To:

Attention:

Date

12/6/2023

Customer PO:

Reference: Sales Rep: SP

INVOICE

Type

SO Invoice

Currency Code:

Page

1

Region: OEIT Order Class: R Order Entry: AW

Bill To Phone: 44-153-563-4542 **Bill To Fax:** 44-153-563-5582

Resale Number:

Number

382484

333353

STEVE NIXON

PVM3460

Ship Via: UPS Express Saver 1-3 BUS END OF

FOB: SHIPPING POINT

Freight Terms: Collect

Terms: NET 45 DAYS

BILL TO

VIAMED 15 STATION RD CROSS HILLS, KEIGHLEY WEST YORKSHIRE, BD20 7DT GR

Paying by Check? Maxtec recommends ACH.

Use our BOA Routing /Account: 071000039 / 8670519070

send remittance details to accounting @maxtec.com

LINE PART ID	DESCRIPTION	CUSTOMER PART ID	U/M SHIP DATE	ORDER QUANTITY SHIPPED QUANTITY	UNIT PRICE EXTENSION	DISC
1	AUDIBLE ALARM ASSEMBLY 504566		EA	8.0000	50.00	IAX
	MISC MEDICAL		12/6/2023	8.0000	400.00	N
Lot	t IDs:					
10 ⁻	1812					
2	TEE ADAPTER, BLUE	Ē	EA	10.0000	7.96	
RP16P02	2		12/6/2023	10.0000	79.60	N
Lot	t IDs:					
117	7640					
3	3 SENSOR, MAX-250MS MEDICAL OXYGEN		EA	10.0000	75.97	
R125P97	•	R125P97	12/6/2023	10.0000	759.70	N
Ser	rial Numbers:					
JK	37799110	JK37799109	JK37799108	JK37799107		
JK	37799106	JK37799105	JK37799104	JK37799103		
JK	37799102	JK37799101				
Lot	IDs:					
JK	37799					
4	FREIGHT CHARGE		EA	0.0000	0.00	
			12/6/2023	0.0000	0.00	N

PLEASE ASK CUSTOMER SERVICE BEFORE SHIPPING ORDER, AS CUSTOMER WANTS TO GIVE THE GREEN LIGHT BEFORE SHIPPING.

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

SHIPPING NOTES: PLEASE SEE BELOW.

EYEMAX ORDERS - SHIP USING UPS EXPEDITED ON ACCT#: 9W9-638.

ALL OTHER PRODUCTS UNLESS SPECIFIED - SHIP USING UPS EXPRESS SAVER ON ACCT#: 9W9-638.



SOLD TO

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

IVIO7 33

BILL TO

VIAMED 15 STATION RD CROSS HILLS, KEIGHLEY WEST YORKSHIRE, BD20 7DT GR M5755

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INVOICE									
Date	Number	Туре	Page						
12/6/2023	382484	SO Invoice	2						
Customer PO :	PVM3460	Currency Code:							

Sales Order ID: 333353 Confirm To: STEVE NIXON

Attention:

Reference: Sales Rep: SP

Region: OEIT Order Class: R Order Entry: AW

Bill To Phone: 44-153-563-4542 **Bill To Fax**: 44-153-563-5582

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

"DO NOT USE ANY BOX LARGER THAN 20X20X16 AND ONLY USE DOUBLE WALL BOX WHEN USING 20X20X16"

TEL: 440-153-563-4542

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:

1Z8412986741531855

INVOICE SUBTOTAL DISC % DISC AMT TAX AMT VAT AMT FREIGHT AMT

1,239.30 INVOICE TOTAL

1,239.30