



CUSTOMER P.O. NO.	ATTENTION
PVM4053	
SOLD TO PHONE NO.	SOLD TO FAX NO.
44-153-563-4542	44-153-563-5582

**SOLD TO**

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

**SHIP TO**

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

**BILL TO**

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

SALES ORDER		S.O. NUMBER	ORDER DATE	ORDER TYPE
		345369	10/18/2024	* Normal *
PAGE	CHG NO.	CHANGE DATE	CHANGE DESCRIPTION	CONFIRMED TO
1				STEVE NIXON
CURRENCY		TERMS		REFERENCE
		NET 45 DAYS		
SHIP VIA		FOB	FREIGHT TERMS	
SEE NOTES		SHIPPING POINT	Collect	
RESALE NO.			TAX CODE:	
			T = TAXABLE R = RESALE N = NONTAXABLE	

LINE	PART ID	DESCRIPTION	DWG REV	ECN	REQUEST/ SCHEDULED SHIP DATE	ORDER QUANTITY BALANCE DUE	U/M	UNIT PRICE EXTENDED PRICE	PRICE CODE	TAX CODE DISC % VAT
		CUST PART ID								
1.00	SENSOR,OXYGEN,MAX-12/SIEMENS R109P45		N		10/22/2024 12/20/2024	15.0000	EA	59.530000 892.95	BSE	N
2.00	SENSOR,OXYGEN,MAX-12A R109P48		H	BOM-F	10/22/2024 12/20/2024	6.0000	EA	64.400000 386.40	BSE	N
3.00	SENSOR, MAX-12C OXYGEN R109P53		E		10/22/2024 12/20/2024	11.0000	EA	64.400000 708.40	BSE	N
4.00	SENSOR, OXYGEN, MAX-13 R115P10		S		10/22/2024 12/20/2024	2.0000	EA	59.530000 119.06	BSE	N



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LINE	PART ID	DESCRIPTION	DWG REV	ECN	REQUEST/ SCHEDULED SHIP DATE	ORDER QUANTITY BALANCE DUE	U/M	UNIT PRICE EXTENDED PRICE	PRICE CODE	TAX CODE DISC % VAT
5.00	SENSOR, MAX-250 INTERNAL MEDICAL				10/22/2024	22.0000	EA	45.000000	SP	N
	R125P01-002		W	BOM-L	12/20/2024			990.00		
	R125P01-002-2024									
6.00	SENSOR, MAX-250K VIASYS DC CONNET MED.				10/22/2024	15.0000	EA	73.030000	SP	N
	R125P11-001		D	BOM-M	12/20/2024			1,095.45		
	R125P11-001-2024									

PLEASE SEND ALL UPS NOTIFICATIONS TO [cathy.green@viamed.co.uk](mailto: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.

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

TEL: 440-153-563-4542



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		CUST PART ID								

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:

SUBTOTAL	DISC %	ORDER DISC AMOUNT	ORDER TAX AMOUNT	ORDER TAX AMOUNT 2	ORDER TAX AMOUNT 3	ORDER VAT AMOUNT	ORDER TOTAL
4,192.26							4,192.26
ORDER TAKER	SALESMAN	REGION	CLASS				
NT	SP	OEIT	R				