

## **SOLD TO**

**BILL TO** 

Use our BOA Routing /Account: 071000039 / 8670519070

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

VIAMED

15 STATION RD

CROSS HILLS, KEIGHLEY

Paying by Check? Maxtec recommends ACH.

WEST YORKSHIRE, BD20 7DT

M5755

M5755

344242 STEVE NIXON

397278

PVM4000

Number

**Confirm To:** Attention: Reference:

Sales Order ID:

Date

11/13/2024

Customer PO:

Order Class:

Sales Rep:

NT

Page

SP

1

OEIT Region:

**INVOICE** 

Order Entry:

**Currency Code:** 

Bill To Phone: Bill To Fax:

> Ship Via: FOB:

44-153-563-4542 44-153-563-5582

Resale Number:

SHIPPING POINT

UPS Express Saver 1-3 BUS END OF

R

Type

SO Invoice

Freight Terms:

Collect

NET 45 DAVS

nd remittance details to accounting @maxtec.com		Terms:	NET 45 DAYS		
LINE DESCRIPTION PART ID	CUSTOMER PART ID	U/M SHIP DATE	ORDER QUANTITY SHIPPED QUANTITY	UNIT PRICE EXTENSION	DISC TAX
1 SENSOR, MAX-125M OXYGEN MEDICAL R140P07-001		EA 11/13/2024	25.0000 25.0000	66.07 1,651.75	N
Serial Numbers:					
KL93699051	KL93699052	KL93699053	KL93699054		
KL93699055	KL93699056	KL93699057	KL93699058		
KL93699059	KL93699060	KL93699061	KL93699062		
KL93699063	KL93699064	KL93699065	KL93699066		
KL93699067	KL93699068	KL93699069	KL93699070		
KL93699071 KL93699072		KL93699073	KL93699075		
KL93699074					
<b>Lot IDs:</b> KL93699					
2 SENSOR, OXYGEN, MAX-13		EA	1.0000	59.53	
R115P10		11/13/2024	1.0000	59.53	N
Serial Numbers:					
KK98702072					
Lot IDs: KK98702					
3 SENSOR,OXY	GEN, MAX-14	EA	1.0000	87.30	
R116P80	R116P80-2024	11/13/2024	1.0000	87.30	N

## Serial Numbers:

KH66301089

Lot IDs: KH66301



SOLD TO

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

M5755

M5755

Sales Order ID: Confirm To:

Attention:

Date

11/13/2024

Customer PO:

Reference:

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

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

Resale Number:

Number

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STEVE NIXON

PVM4000

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

**INVOICE** 

Type

SO Invoice

**Currency Code:** 

Sales Rep:

Page 2

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NT

FOB: SHIPPING POINT

Collect Freight Terms:

**NET 45 DAYS** Terms:

15 STATION RD

**VIAMED** 

CROSS HILLS, KEIGHLEY WEST YORKSHIRE, BD20 7DT

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LINE PART ID	DESCRIPTION	CUSTOMER PART ID	U/M SHIP DATE	ORDER QUANTITY SHIPPED QUANTITY	UNIT PRICE EXTENSION	DISC TAX
4	FREIGHT CHARGE		EA 11/13/2024	0.0000 0.0000	0.00 0.00	N

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

SHIPPING NOTES: PLEASE SEE BELOW.

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

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:

1Z8412980449161528

INVOICE SUBTOTAL DISC AMT TAX AMT VAT AMT FREIGHT AMT INVOICE TOTAL 1,798.58 1,798.58