

SOLD TO

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

M5755

Attention:

Date

3/31/2025

Customer PO:

Sales Order ID:

Confirm To:

Region:

Reference:

Order Class:

INVOICE

Type

SO Invoice

Sales Rep:

Currency Code:

Order Entry:

NT

SP

Page

1

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

Resale Number:

Ship Via: FOB:

Terms:

OEIT

Number

402554

345783

STEVE NIXON

PVM4078

UPS Express Saver 1-3 BUS END OF

R

SHIPPING POINT

Freight Terms: Collect

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 TAX
1 10003V2	KIT, BLENDER MAINTENANCE INTERNATIONAL	EA 3/28/2025	3.0000 3.0000	231.49 694.47	N
	IDs: 6039				
2	FREIGHT CHARGE	EA 3/31/2025	1.0000 1.0000	0.00 0.00	N

 ${\tt PLEASE \ SEND \ ALL \ UPS \ NOTIFICATIONS \ TO \ cathy.green@viamed.co.uk. \ THANK \ YOU.}$

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:

INVOICE TOTAL	FREIGHT AMT	VAT AMT	TAX AMT	DISC AMT	DISC %	INVOICE SUBTOTAL
694.47						694.47