

	CUSTOMER P.O. NO.		ATTENTION
PVM4754			
	SOLD TO PHONE NO.		SOLD TO FAX NO.
44-153-563-4542		44-153-563-5582	

SALES O	RDER	S.O. NUMBER <b>357551</b>	ORDER DATE 11/4/2025	* Normal *	ORDER TYPE
CHG NO.	CHANGE DATE	CF	HANGE DESCRIPTION	STEVE NIXON	CONFIRMED TO
CURRENCY	′	NET 45 DAYS	TERMS		REFERENCE
UPS Express Sa	SHIP VIA	SHIPPING POINT	FOB -	Collect	FREIGHT TERMS
	RESALE NO.	Page 1 of 2		TAX CODE: E R = RESALE N = NO	ONTAXABLE

SOLD TO SHIP TO BILL TO

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

LINE	DESCRIPTION PART ID CUST PART ID	DWG REV	ECN	REQUEST/ SCHEDULED SHIP DATE	ORDER QUANTITY BALANCE DUE	U/M	UNIT PRICE EXTENDED PRICE	PRICE CODE	TAX DISC	CODE C % VAT
1.00	MOUNT, POLE/RAIL BLENDER R100P26	L	BOM-N	11/4/2025 11/11/2025	2.0000	EA	71.710000 143.42	BSE	T	TAR
2.00	SENSOR,MAX-250,INTERNAL(B) II R125P02-003 R125P02-003-2025	NDUSTRIAL AD	BOM-J	11/4/2025 11/11/2025	50.0000	EA	46.800000 2,340.00	SP	Т	TAR

SHIPPING NOTES: SHIP USING UPS EXPRESS SAVER ON ACCT#: 9W9-638.

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

"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:



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SALES (	ORDER	s.o. NUMBER <b>357551</b>		ORDER DATE 1/4/2025	* Normal *	ORDER TYPE
CHG NO.	CHG NO. CHANGE DATE		CHANGE DESCRIPTION			CONFIRMED TO
					STEVE NIXON	
CURRENC	Y			TERMS		REFERENCE
		NET 45 DAYS				
	SHIP VIA	A		FOB		FREIGHT TERMS
UPS Express Sa	aver 1-3 BUS EN	SHIPPING POINT	Γ		Collect	
	RESALE NO.	PAC	3E	TAX CODE:		
		Page 2 of 2		T = TAXABLE R = RESALE N = NONTAXA		

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

LINE	DESCRIPTION			REQUEST/	ORDER QUANTITY	U/M	UNIT PRICE	PRICE	TAX CODE
	PART ID	DWG REV	ECN	SCHEDULED	BALANCE DUE		EXTENDED PRICE	CODE	DISC % VAT
	CUST PART ID			SHIP DATE	BALAITOL BOL		EXTENSEST THOSE		

SUBTOTAL		DISC %	ORDER DISC AMOUNT		Tariff Surcharge	ORDER TAX AMOUNT 2	ORDER TAX AMOUNT 3	ORDER TAX AMOUNT 4	ORDER TAX AMOUNT 5
2,	483.42				49.67				
ORDER TAKER	SALESMAN	REGION		CLASS	ORDER TAX AMOUNT 6	ORDER TAX AMOUNT 7	ORDER TAX AMOUNT 8	ORDER TAX AMOUNT 9	ORDER TAX AMOUNT 10
NT	SP		OEIT	R					
	-							ORDER VAT	ORDER TOTAL
									2,533.09