



REMIT TO: Maxtec LLC
1001 New Hampshire Ave, Ste. B, Lakewood, NJ 08701

SOLD TO

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

BILL TO

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

Paying by Check? Maxtec recommends ACH.
Use our BOA Routing /Account: 071000039 / 8670519070
send remittance details to accounting@maxtec.com

INVOICE			
Date	Number	Type	Page
12/3/2025	411820	SO Invoice	Page 1 of 1
Customer PO :		PVM4810	Currency Code:

Sales Order ID: 358249
Confirm To: STEVE NIXON
Attention:

Reference: Sales Rep: SP

Region: OEIT Order Class: R Order Entry: NT

Bill To Phone: 44-153-563-4542
Bill To Fax: 44-153-563-5582
Resale Number:
Ship Via: UPS Express Saver 1-3 BUS EN
FOB: SHIPPING POINT
Freight Terms: Collect
Terms: NET 45 DAYS

LINE	DESCRIPTION	U/M	ORDER QUANTITY	UNIT PRICE	DISC
PART ID	CUSTOMER PART ID	SHIP DATE	SHIPPED QUANTITY	EXTENSION	TAX
1	BRACKET, WALL MOUNT, BLENDER	EA	9.0000	52.27	
RP05P07		12/2/2025	9.0000	470.43	T
Lot IDs:					
127421					
2	FREIGHT CHARGE	EA	0.0000	0.00	
		12/2/2025	0.0000	0.00	N

OK TO EARLY SHIP - CUSTOMER NEEDS ASAP

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

SHIPPING NOTES: 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
1Z8412980449575957

INVOICE SUBTOTAL	DISC %	TARIFF SURCHARGE	TAX AMT	VAT AMT	FREIGHT AMT	INVOICE TOTAL
470.43		9.41				479.84