



INVOICE			
Date	Number	Type	Page
8/12/2020	318062	SO Invoice	Page 1 of 1
Customer PO :		PVM1264	Currency Code:

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

Sales Order ID: 283459
Confirm To: STEPHEN NIXON
Attention:
Reference: **Sales Rep:** BK
Region: OEIT **Order Class:** R **Order Entry:** LF
Bill To Phone: 44-153-563-4542
Bill To Fax: 44-153-563-5582
Resale Number:
Ship Via: SEE NOTES
FOB: SHIPPING POINT
Freight Terms: Collect
Terms: NET 45 DAYS

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

LINE PART ID	DESCRIPTION CUSTOMER PART ID	U/M SHIP DATE	ORDER QUANTITY SHIPPED QUANTITY	UNIT PRICE EXTENSION	DISC TAX
1 R217P72	ANALYZER, MAXO2+ AE MEDICAL	EA 8/12/2020	200.0000 24.0000	245.00 5,880.00	N
2 R217P72	ANALYZER, MAXO2+ AE MEDICAL	EA 8/12/2020	200.0000 24.0000	245.00 5,880.00	N
3 R217P72	ANALYZER, MAXO2+ AE MEDICAL	EA 8/12/2020	200.0000 24.0000	245.00 5,880.00	N
4	FREIGHT CHARGE	EA 8/12/2020	0.0000 0.0000	0.00 0.00	N
5	INTERNATIONAL WIRING FEE	EA 8/12/2020	1.0000 1.0000	25.00 25.00	N

SHIPPING NOTES: SHIP UPS INT'L EXPED. COLLECT TO UPS ACCT. 9W9-638
 WHEN SHIPPING SENSORS PLEASE USE HTS CODE 9018.90.8500
 "Do not use any box larger than 20x20x15
 TEL: 440-153-563-4542

***** PLEASE SHIP NO LESS THAN 48 MAXO2 AE'S IF PARTIAL IS SHIPPED *****

WHEN SHIPPING (ME) PLEASE ADD EXTRA PACKING ALL AROUND PRODUCT

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 Assurance / Regulatory Affairs or Designee
 Authorized Signature:

INVOICE SUBTOTAL	DISC %	DISC AMT	TAX AMT	VAT AMT	FREIGHT AMT	INVOICE TOTAL
17,665.00						17,665.00

Customer