

5635 Peck Road Arcadia, CA 91006 T (800) 447-6739 F (626) 443-5014 www.posey.com Quote Number: Q04985

PO No: **PVM1970**

Order Date: 06-11-21

Page No: 1

Bill To: 8954
VIAMED LTD
15 STATION RD CROSS HILLS
KEIGHLEY W YORKSHIRE BD20 7DT
UNITED KINGDOM
United Kingdom

Ship To: 8954*S001 VIAMED LTD 15 STATION RD CROSS HILLS KEIGHLEY W YORKSHIRE BD20 7DT UNITED KINGDOM United Kingdom

Sales Rep	Ship Via	Freight Terms						
97 EUROPE SALES	MISCELLANEOUS	3RD PTY/RECVR/						
_n Item/Part No Number		Order Order Qty UM		nit Exter ice F	nded Price			
1 6554 08 POSEY OXI	METER PROBE WRAP							
'		1440 DZ	DZ	6.33	9115.20			
SELLER HEREBY NOTIFIES BUYER THAT IT SHALL HAVE UNTIL THE EXPIRATION OF CURRENT PRICING DATE TO ACCEPT THIS PROFORMA INVOICE IN WRITING AT THE TERMS AND CONDITIONS LISTED BELOW.NOTE: PRICES ARE SUBJECT TO CHANGE WITHOUT NOTICE. IN THE EVENT THE BUYER DOES NOT ACCEPT THIS PROFORMA INVOICE WITHIN THE ABOVE SPECIFIED TIME-FRAME, SELLER SHALL HAVE THE RIGHT TO CHANGE ANY/ALL OF THE ABOVE TERMS. BUYER SHALL HAVE NO RECOURSE AGAINST SELLER FOR ANY CHANGE IN TERMS IF BUYER HAS NOT COMPLIED WITH ALL OF THE TERMS AND CONDITIONS AND BUYER SHALL HOLD SELLER HARMLESS OF LOSS, INJURY OR DAMAGE BUYER MAY HAVE INCURRED DUE TO FAILURE TO COMPLY.								
SALES TAXES, TAND OTHER GOVE	UST BE MADE IN US D ARRIFF, CUSTOM AND RNMENTAL CHARGES SH BUYER'S RESPONSIBIL	FREIGHT CHARGES ALL BE PAID BY						
PURPOSE OF PROPERTIES OF SHALL BE DEEMED ORDER.	INVOICE IS BEING PR DUCT IDENTIFICATION SALE AND CONFIRMATION O AS SELLER'S ACCEP	, TERMS AND ON AND IN NO WAY TANCE OF ANY						
	TO CANCEL: SELLER : L THIS ORDER FOR "J"							

**=Delivery dates relative to quote acceptance date

If buyer submits a claim or request for Medicare or Medicaid payment for products purchased under this invoice, buyer is responsible for fully and accurately reporting to the applicable government agencies in an an effective manner all discounts, rebates, incentive payments, bonuses and the like applicable to such products, including those reflected herein and others may apply.



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	Item/Part Number		Order Order	Unit Price	Extended Price					
INO	Number		Qty UM	Price	Price					
	TIME PRIOR TO A	ACCEPTANCE OF ANY P	AYMENT FROM BUYER							
EFFECTIVE DATES: PRICES ARE EFFECTIVE JANUARY 1st										
THROUGH DECEMBER 31st OF THE CURRENT YEAR.										
SHIPPING TERMS: FOB SHIPPING POINT: ARCADIA,										
CALIFORNIA, USA.										
	MINIMUM ORDER: ANY QUANTITY ORDER IS ACCEPTABLE.									
	HANDLING FEE: A HANDLING FEE OF \$49.95 WILL APPLY									
	TO EACH ORDER THAT TOTALS \$999.99 OR LESS.									
	PAYMENT TERMS: NET 60 DAYS, SUBJECT TO CREDIT									
	APPROVAL OR RECEIVE AN ADDITIONAL 10% DISCOUNT ON									
	PREPAID ORDERS (HANDLING & FREIGHT EXCLUDED) WHEN									
	ALL PREVIOUS INVOICES ARE PAID IN FULL WITH A \$0									
	ACCOUNT BALANCE.									
	LATE FEE: 1 1/2% PER MONTH, 18% PER YEAR ASSESSED									
	ON PAST DUE NOTICES.									
	SHORTAGES/ERRORS: NOTIFICATION OF ANY SHORTAGES OR INCORRECT SHIPMENTS MUST BE MADE WITHIN TEN									
	(10) DAYS OF DATE OF INVOICE.									
	PACKAGING: PRODUCT MAY BE PACKAGED BY PAIR, DOZEN,									
	SET, OR DOZEN PAIR, etc. REFER TO THE APPROPRIATE									
	UNIT OF SALE COLUMN FOR ITEM PACKAGING.									
	CHIL OF PARE CO	LOIN FOR THE FACE	101110							