



CUSTOMER P.O. NO.	ATTENTION
PVM2257	
SOLD TO PHONE NO.	SOLD TO FAX NO.
44-153-563-4542	44-153-563-5582

SALES ORDER		S.O. NUMBER	ORDER DATE	ORDER TYPE
		306800	11/20/2021	* Normal *
PAGE	CHG NO.	CHANGE DATE	CHANGE DESCRIPTION	CONFIRMED TO
1				STEPHEN NIXON
CURRENCY		TERMS		REFERENCE
		NET 45 DAYS		
SHIP VIA		FOB		FREIGHT TERMS
SEE NOTES		SHIPPING POINT		Collect
RESALE NO.		TAX CODE:		
		T = TAXABLE R = RESALE N = NONTAXABLE		

SOLD TO

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

SHIP TO

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

BILL TO

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

LINE	PART ID	DESCRIPTION	DWG REV	ECN	REQUEST/ SCHEDULED SHIP DATE	ORDER QUANTITY BALANCE DUE	U/M	UNIT PRICE EXTENDED PRICE	PRICE CODE	TAX CODE DISC % VAT
1.00	SENSOR, MAX-48 OXYGEN R112P18		C		11/20/2021 1/7/2022	10.0000	EA	58.000000 580.00	DL	N
2.00	SENSOR, MAX-250+ INTERNAL MEDICAL R125P02-011		AA	BOM-G	11/20/2021 1/7/2022	5.0000	EA	71.000000 355.00	DL	N

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

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



CUSTOMER P.O. NO.	ATTENTION
PVM2257	
SOLD TO PHONE NO.	SOLD TO FAX NO.
44-153-563-4542	44-153-563-5582

SOLD TO

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

SHIP TO

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

BILL TO

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

SALES ORDER		S.O. NUMBER	ORDER DATE	ORDER TYPE
		306800	11/20/2021	* Normal *
PAGE	CHG NO.	CHANGE DATE	CHANGE DESCRIPTION	CONFIRMED TO
2				STEPHEN NIXON
CURRENCY		TERMS		REFERENCE
		NET 45 DAYS		
SHIP VIA		FOB		FREIGHT TERMS
SEE NOTES		SHIPPING POINT		Collect
RESALE NO.		TAX CODE:		
		T = TAXABLE R = RESALE N = NONTAXABLE		

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

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:

SUBTOTAL	DISC %	ORDER DISC AMOUNT	ORDER TAX AMOUNT	ORDER TAX AMOUNT 2	ORDER TAX AMOUNT 3	ORDER VAT AMOUNT	ORDER TOTAL
935.00							935.00
ORDER TAKER	SALESMAN	REGION	CLASS				
AW	VD	OEIT	R				