



**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

INVOICE			
Date	Number	Type	Page
8/20/2021	339858	SO Invoice	Page 1 of 1
Customer PO :		PVM2052	Currency Code:

**Sales Order ID:** 301940  
**Confirm To:** STEPHEN NIXON  
**Attention:**  
**Reference:** 61820301940 **Sales Rep:** VD  
**Region:** OEIT **Order Class:** R **Order Entry:** AW  
**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

LINE PART ID	DESCRIPTION CUSTOMER PART ID	U/M SHIP DATE	ORDER QUANTITY SHIPPED QUANTITY	UNIT PRICE EXTENSION	DISC TAX
1 R125P02-003	SENSOR,MAX-250,INTERNAL(B) INDUSTRIAL R125P02-003	EA 8/19/2021	200.0000 200.0000	45.00 9,000.00	 N
2 R212P90	CASE,BAT-SEN,OM-25MA	EA 8/19/2021	5.0000 5.0000	2.70 13.50	 N
3	INTERNATIONAL FEE	EA 8/20/2021	1.0000 1.0000	25.00 25.00	 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**

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:

INVOICE SUBTOTAL	DISC %	DISC AMT	TAX AMT	VAT AMT	FREIGHT AMT	INVOICE TOTAL
9,038.50						9,038.50

**Customer**