

**BILL TO** 

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

VIAMED

GB

15 STATION RD

CROSS HILLS, KEIGHLEY

WEST YORKSHIRE, BD20 7DT

M5755

M5755

5 Sales Order ID: Confirm To: 310448 STEPHEN NIXON

Attention:

Region:

Date

3/28/2022

Customer PO:

Reference:

Sales Rep:

**Currency Code:** 

SW Orde

Type

RA Credit Memo

Order Entry: OC

Page

VD

1

Bill To Phone: Bill To Fax:

**OEIT** 

Number

352344

CRPVM1989

44-153-563-4542 44-153-563-5582

Resale Number:

Ship Via:

Freight Terms:

Terms:

FOB:

SHIPPING POINT No Charge

INVOICE

NO CHARGE

**Order Class:** 

LINE DESCRIPTION U/M ORDER QUANTITY **UNIT PRICE** DISC PART ID **CUSTOMER PART ID** SHIP DATE SHIPPED QUANTITY **EXTENSION** TAX SENSOR, MAX-250E, EXTERNAL MEDICAL 1 EΑ 34.0000 45.00 -1,080.00 R125P03-002 R125P03-002 3/23/2022 24.0000 Ν Serial Numbers: GD11999028 GD11999029 GD11999030 GD11999036 GD11999037 GD11999040 GD11999041 GD11999042 GD11999044 GD11999047 GD11999049 GD11999051 GD11999054 GD11999059 GD11999061 GD11999063 GD11999065 GD11999066 GD11999067 GD11999068 GD11999069 GD11999073 GD11999074 GD11999082 Lot IDs: GD11999 2 SENSOR,MAX-250E,EXTERNAL MEDICAL EΑ 34.0000 45.00 R125P03-002 R125P03-002 3/23/2022 10.0000 -450.00 Ν Serial Numbers: GC12999371 GC12999379 GC12999382 GC12999385 GC12999446 GC12999438 GC12999441 GC12999455 GC12999464 GC12999469

## Lot IDs:

GC12999

RMA FOR CREDIT

Serial No. GD11999040, 041, 082, 063, 066, 044, 065, 067, 028, 069, 042, 030, 051, 061, 037, 049, 036, 059, 074, 054,

029, 073, 068, 047

Serial No. GC12999438, 441, 382, 446, 469, 385, 371, 464, 379, 455

Lot# GD11999, GC12999

Original Sales Order #: 300302

OS/ The customer states :we have confirmed the faults, which include: low output, non-linearity and unstable.



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

M5755

**BILL TO** 

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

Date Number Page Type 352344 3/28/2022 RA Credit Memo CRPVM1989 Customer PO: **Currency Code:** 

**INVOICE** 

2

310448 Sales Order ID: **Confirm To:** STEPHEN NIXON

Attention:

VD Reference: Sales Rep:

OC OEIT Order Class: SW Order Entry: Region:

> Bill To Phone: 44-153-563-4542 44-153-563-5582 Bill To Fax:

Resale Number:

Ship Via:

SHIPPING POINT FOB: No Charge Freight Terms:

NO CHARGE Terms:

LINE DESCRIPTION		U/M	ORDER QUANTITY	UNIT PRICE	DISC
PART ID	CUSTOMER PART ID	SHIP DATE	SHIPPED QUANTITY	EXTENSION	TAX

INVOICE SUBTOTAL DISC AMT TAX AMT VAT AMT FREIGHT AMT INVOICE TOTAL -1,530.00 -1,530.00



**BILL TO** 

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

M5755

M5755

Confirm To:

Attention:

Sales Order ID:

Date

3/28/2022

Customer PO:

Reference: 74211311303 **OEIT** 

Number

352488

311303

STEPHEN NIXON

PVM2434

Sales Rep:

**Currency Code:** 

Page

VD

AW

1

Order Entry: Region: Bill To Phone: 44-153-563-4542

Order Class:

INVOICE

Type

SO Invoice

R

Bill To Fax: 44-153-563-5582

Resale Number:

SEE NOTES Ship Via: FOB: SHIPPING POINT

Collect Freight Terms:

NET 45 DAYS Terms: LINE DESCRIPTION U/M ORDER QUANTITY **UNIT PRICE** DISC PART ID **CUSTOMER PART ID** SHIP DATE SHIPPED QUANTITY **EXTENSION** TAX MAXBLEND2, 0-15 LPM, NIST, 60 PSI 1 EΑ 2.0000 1,385.00 R229P01-024 3/25/2022 2.0000 2,770.00 Ν Serial Numbers: HC17033001 HC17033002 Lot IDs:

HC17033

VIAMED

15 STATION RD

CROSS HILLS, KEIGHLEY

WEST YORKSHIRE, BD20 7DT

FLOWMETER, DFB, 0-30 DUAL TAPER W/DISS

R219P88-400

EΑ 3/25/2022

1.0000 1.0000 159.60

159.60 Ν

Lot IDs:

101675

PLEASE USE CORRECT HTS CODE FOR PARTS ON ORDER!! IF YOU DON'T HAVE THEM GET FROM ROBERT.

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

"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:



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

**BILL TO** 

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

INVOICE							
Date	Number	Type	Page				
3/28/2022	352488	SO Invoice	2				
Customer PO :	PVM2434	Currency Code:					

Sales Order ID: 311303 Confirm To: STEPHEN NIXON

Attention:

M5755

M5755

 Reference:
 74211311303
 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	DESCRIPTION		U/M	ORDER QUANTITY	UNIT PRICE	DISC
PART ID		CUSTOMER PART ID	SHIP DATE	SHIPPED QUANTITY	EXTENSION	TAX

INVOICE SUBTOTAL DISC % DISC AMT TAX AMT VAT AMT FREIGHT AMT 1NVOICE TOTAL 2,929.60 2,929.60