



| INVOICE       |        |            |                |
|---------------|--------|------------|----------------|
| Date          | Number | Type       | Page           |
| 4/28/2022     | 354691 | SO Invoice | Page 1 of 1    |
| Customer PO : |        | PVM2475    | Currency Code: |

**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

**Sales Order ID:** 312489  
**Confirm To:** STEPHEN NIXON  
**Attention:**  
**Reference:** 76611312489 **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<br>PART ID | DESCRIPTION<br>CUSTOMER PART ID              | U/M<br>SHIP DATE | ORDER QUANTITY<br>SHIPPED QUANTITY | UNIT PRICE<br>EXTENSION | DISC<br>TAX |
|-----------------|--|------------------|------------------------------------|-------------------------|-------------|
| 1<br>R115P85    | SENSOR,MAX-250ESF EXTERNAL OXYGEN<br>R115P85 | EA<br>4/28/2022  | 4.0000<br>4.0000                   | 47.25<br>189.00         | <br>N       |
| 2               | FREIGHT CHARGE                               | EA<br>4/28/2022  | 0.0000<br>0.0000                   | 0.00<br>0.00            | <br>N       |

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:

|                  |        |          |         |         |             |               |
|------------------|--------|----------|---------|---------|-------------|---------------|
| INVOICE SUBTOTAL | DISC % | DISC AMT | TAX AMT | VAT AMT | FREIGHT AMT | INVOICE TOTAL |
| 189.00           |        |          |         |         |             | 189.00        |

**Customer**