

SOLD TO

BILL TO

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

VIAMED

15 STATION RD

CROSS HILLS, KEIGHLEY

WEST YORKSHIRE, BD20 7DT

M5755

M5755

Sales Order ID: Confirm To:

317909 STEPHEN NIXON

361521

PVM2731

Number

Attention:

Region:

Date

9/8/2022

Customer PO:

Reference:

Sales Rep:

Currency Code:

R Order Entry:

Type

SO Invoice

AW

VD

Page

1

Bill To Phone: Bill To Fax:

> Ship Via: FOB:

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

INVOICE

Resale Number:

OEIT

SEE NOTES SHIPPING POINT

Order Class:

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
1	SENSOR, MAX-43 OXYGE	N DUAL PACK	EA	26.0000	145.53	
R109P0	07		9/8/2022	26.0000	3,783.78	N
Se	erial Numbers:					
Н	E20702031/HE20702032	HE20702033/HE20702034	HE20702035/HE2	20702036 HE207020	039/HE20702040	
Н	IE20702041/HE20702042	HE20702043/HE20702044	HE20702045/HE2	20702046 HE207020	047/HE20702048	
Н	IE20702049/HE20702050	HE20702055/HE20702056	HE20702057/HE2	20702058 HE207020	059/HE20702060	
Н	E20702065/HE20702066	HE20702067/HE20702068	HE20702069/HE2	20702070 HE207020	75/HE20702076	
Н	E20702079/HE20702080	HE20702081/HE20702082	HE20702083/HE2	20702084 HE207020	085/HE20702086	
Н	E20702087/HE20702088	HE20702089/HE20702090	HE20702091/HE2	20702092 HE207020	93/HE20702094	
Н	E20702097/HE20702098	HE20702099/HE20702100				
	ot IDs:					
Н	E20702					
2	FREIGHT CHARGE		EA	0.0000	0.00	
			9/8/2022	0.0000	0.00	N
3	BANK FEE		EA	1,0000	25.00	
3	DAINIXILL		9/8/2022	1.0000	25.00	N
			31012022	1.0000	25.00	IN

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



SOLD TO

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		Туре	Page						
9/8/2022	361521	SO Invoice	2						
Customer PO :	PVM2731	Currency Code:							

Sales Order ID: 317909
Confirm To: STEPHEN NIXON

Attention: Reference:

VD

Sales Rep:

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

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.

M5755

M5755

Quality Inspection Approval Stamp and Signature:

INVOICE SUBTOTAL DISC % DISC AMT TAX AMT VAT AMT FREIGHT AMT

3,808.78

INVOICE TOTAL

3,808.78