

COMMERCIAL INVOICE

Shipper/Exporter: NAME: ADDRESS: TLE:			Airway Bill Number: Export Date Weight: <div style="text-align: center;">(KG)</div>					
Receiver/Consignee: NAME: ADDRESS: TLE:			Country of Ultimate Destination Exporting Carrier: Terms of Trade::					
Box #	Description of Merchandise	Material	Country of Origin	Quantity	Unit	Unit Value	Line Total:	
Empty space for merchandise details								
						Invoice Total:	USD	-
						Insurance:		
						Freight:		
						Total :		-
VENDOR INVOICES INCLUDED								

These commodities, technology or software were exported from the united states in accordance with the Export Administration Regulations. Diversion contrary to U.S. law is prohibited.

Signature of Authorized Person