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EXPORTE							Ship Date:								
Tax ID#:	•••						24 Apr, 20								
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	ame: John						-	_							
Telephone	No.: (732	) 484-9848					786330513 Invoice No.:		_						
E-Mail:									rchase Order No.:						
Company I	Namo/Addr	occ.					171515		72	200980868					
Company Name/Address: Medchemexpress LLC								rms:	Bil	l of Lading:					
	•														
9 Deer pa	ark Drive,	Suite K-2					D	01-1							
								Purpose of Shipment:							
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		TATES OF	AMEDICA												
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	Transaction	n:	<u> </u>												
Re	lated		X Non-Rela	ated			SOLD TO / IMPORTER (if different from Consignee):								
CONSIGNE	E:						30LD 1071	WIPORTER (II diller	ent from Cons	ignee):					
Tax ID#:							X Same	as CONSIGNEE:							
Contact Na	ame. DEC	EI\/ING/pot	‡720098086	0			Carlo Carlo								
			1 20090000	0											
Telephone	No.: (416	) 673-5496					Tax ID#:								
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No. of	No. of	Net Weight	Unit of		Danasis	tion of Coods		Harmonized	Country of	Unit		7	Total		
Packages	Units	(LBS / KGS)	Measure		Descrip	tion of Goods		Tariff Number	Manufacture	Value		v	/alue		
1	1.00	0.50	PCS	HY-70002,CA	AS No:	915087-33-		38220000300	CN	70.000	000			70.00	
•	1.00	0.00				F4N4O2S,a sy	vnthetic	0	0.1	7 0.000	000			. 0.00	
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Total	Total	Total Net	(Indicate		dicate	Terms EXW				Subtotal:				70.00	
Pkgs	Units	Weight	LBS/KGS)	Weight LB	S/KGS)	of Sale:				Gubtotai.				70.00	
1	1.00	0.5	0 LB	0.50 LB						Insurance:				0.00	
Special Ins										Freight:				60.00	
No Instruc	tion.										$-\!\!+\!\!-$				
										Packing:				0.00	
Declaration Statement(s):  These items are controlled by the U.S. Government and authorized for export only to the country of ultimate destination for use by the ultimate consignee or end-user(s) herein										Handling:				0.00	
identified. Th	ey may not be	resold, transferre	ed, or otherwise di	isposed of, to any other	country or	to any person other that	an the authorized u	Itimate consignee or end-	user(s), either in		$-\!\!\!\!+\!\!\!\!\!-$				
their original	form or after b	eing incorporated	I into other items,	without first obtaining ap	proval fro	m the U.S. government	or as otherwise au	thorized by U.S. law and	regulations.	Other:				0.00	
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l declare ti	nat all the i	nformation c	ontained in th	nis invoice to be t	ue and	correct.				Invoice Total:			1	30.00	
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John Ga	<u> </u>														
Signature	/ Title / Date	. James	62										24 An	r. 2017	

This invo	ice must	be complet	ted in Englis	sh.		Comme	rcial In	voice			Page _	1	_ of	1	
EXPORTE							Ship Date:								
Tax ID#:	•••						24 Apr, 20								
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	ame: John						-	_							
Telephone	No.: (732	) 484-9848					786330513 Invoice No.:		_						
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Packages	Units	(LBS / KGS)	Measure		Descrip	tion of Goods		Tariff Number	Manufacture	Value		v	/alue		
1	1.00	0.50	PCS	HY-70002,CA	AS No:	915087-33-		38220000300	CN	70.000	000			70.00	
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Total	Total	Total Net	(Indicate		dicate	Terms EXW				Subtotal:				70.00	
Pkgs	Units	Weight	LBS/KGS)	Weight LB	S/KGS)	of Sale:				Gubtotai.				70.00	
1	1.00	0.5	0 LB	0.50 LB						Insurance:				0.00	
Special Ins										Freight:				60.00	
No Instruc	tion.										$-\!\!+\!\!\!-$				
										Packing:				0.00	
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Tax ID#:	•••						24 Apr, 20								
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	ame: John						-	_							
Telephone	No.: (732	) 484-9848					786330513 Invoice No.:		_						
E-Mail:									rchase Order No.:						
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Company Name/Address: Medchemexpress LLC								rms:	Bill	l of Lading:					
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