COMMERCIAL INVOICE

00035-06 (6/97) Litho U.S.A.

Fields highlighted in red are required.

DATE	REFERENCE NUMBER

SHIPPER	CONSIGNEE
Name (Required) Phone Number (Required)	Name (Required) Phone Number (Required)
Address	Address
City	City
State/Province Zip/Postal Code	State/Province Zip/Postal Code

IMPORTER (IF OTHER THAN CONSIGNEE)

COUNTRY OR TERRITORY OF ULTIMATE DESTINATION	CONSIGNEE COMPANY
	CONSIGNEE TELEPHONE NO.

MARKS & NUMBERS	NUMBER OF PACKAGES	COMPLETE DESCRIPTION OF GOODS	COUNTRY OR TERRITORY OF ORIGIN	COMMODITY HS CODE	WEIGHT	QUANTITY	UNIT VALUE	TOTAL VALUE
	TOTAL NUMBER OF PACKAGES							

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I HEREBY DECLARE THAT THE INFORMATION ON THIS INVOICE IS TRUE AND CORRECT. I HEREBY AUTHORIZE UPS SUPPLY CHAIN SOLUTIONS TO EXECUTE ANY ADDITIONAL DOCUMENTS AS MAY BE NECESSARY FOR THE EXPORT OF THE GOODS DESCRIBED HEREIN.

TYPE NAME AND TITLE OF SHIPPER | SIGNATURE | DATE

COMMERCIAL INVOICE (continued)

00035-06 (6/97) Litho U.S.A.

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ADDITIONAL COMMENTS

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