

## Commercial Invoice

Date of Export: <b>2/14/2024</b>				Export References (i.e. order no., invoice no., etc): <b>INV24024304/307</b>					
Shipper/Exporter (complete name and address): <b>Biohorizons Implant Systems, Inc. 2300 Riverchase Center Birmingham, AL 35244 U.S.A. ID/EIN: 631163766</b>				Consignee (complete name and address): <b>Global Specialties for Medical Serv King Abdullah Road, AlReways Area Al-Deraies Tower (bravo Building) 3rd Floor Jeddah Saudi Arabia Phone: 966920001819</b>					
Country of export: <b>USA</b>				Importer - if other than recipient (complete name and address):					
Country of manufacture: <b>USA</b>									
Country of ultimate destination: <b>Saudi Arabia</b>									
				Currency: US Dollars		Reason for Export: Sale			
Marks/Nos	No. of	Type of	Full Description	Qty	Units of	Weight	Unit value	Total Value	
5	5	Bx	Dental Implants 9021218000	4457	EA	80	\$67.23	\$299,666.25	
			Dental Instruments 9018490000	549	EA	50	\$96.82	\$53,151.83	
			Dental Mem-Lok 3001900190	4	EA	25	\$106.69	\$426.76	
			Dental Prosthetics 9021218000	8402	EA	90	\$21.00	\$176,434.67	
	Total No. of Pkgs	5 @ 24 x 20 x 20 (50,50,50,40,55)				Total Weight Lbs		Total Invoice Value	
	5					245		\$529,679.51	
I declare all the information contained in this invoice to be true and correct								Tick	
Signature of shipper/exporter (type name and title and sign)  <i>Jolen Ware</i>				Date:  2/14/2024			<input checked="" type="checkbox"/> FCA <input type="checkbox"/> C&F <input type="checkbox"/> CIF		
Jolen Ware International Distribution Specialist									