

## Commercial Invoice

Date of Export: <b>8/20/2024</b>				Export References (i.e. order no., invoice no., etc): <b>INV24130618</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
7	7	Bx	Dental Implants 9021218000	5110	EA	120	\$69.17	\$353,482.00
			Dental Instruments 9018490000	241	EA	80	\$273.09	\$65,814.25
			Dental Prosthetics 9021218000	12750	EA	120	\$21.46	\$273,554.18
	Total No. of Pkgs					Total Weight Lbs		Total Invoice Value
	7	1 @ 18 x 14 x 14 (15)						
		6 @ 24 x 20 x 20 (50,50,50,47,57,51)				320		\$692,850.43
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:  8/20/2024		<input checked="" type="checkbox"/> FCA <input type="checkbox"/> C&F <input type="checkbox"/> CIF		
Jolen Ware International Distribution Specialist								