


Commercial Invoice

| | | | | | | | |
|--|-----------|---------------------------------------|--|--|-----------------------------|------------------------|------------------|
| EXPORTER Paragon Energy Solutions 7410 Pebble Drive Fort Worth TX 76118 US | | EXPORTER No. 1 | Date 09/17/2024 | Export References PR24000812-1 | | | |
| | | | Invoice Number | Purchase Order Number 4500013710 | | | |
| | | | Bill of Lading Number | Letter of Credit Number | | | |
| CONSIGNEE NAWAH ENERGY COMPANY BARAKAH NUCLEAR POWER PLANT PO BOX 112040 ABU DHABI UNITED ARAB EMIRATES 00000 ABU DHABI | | CONSIGNEE No. 862 | BUYER NAWAH ENERGY COMPANY BARAKAH NUCLEAR POWER PLANT PO BOX 112040 ABU DHABI UNITED ARAB EMIRATES 00000 ABU DHABI | | BUYER No. 862 | | |
| NOTIFY SUDHAKARAN THOOKATH 97123061918 | | NOTIFY No. | Country of Origin USA | Place of Delivery UAE | | | |
| | | | Commercial Terms NET 30 DAYS | INCO FCA | | | |
| | | | Other Terms | | | | |
| Carrier | | Vessel | | | | | |
| Seaport of Lading | | Seaport of Discharge | | | | | |
| Item | CO | HS Code | Description | Quantity | UM | Price | Invoice |
| CNT-35-76 | | 9106.90.30.00 | TIMER, EQUALIZING P/N CNT-35-76 | 4 | EA | 5,087.00 | 20,348.00 |
| Page Total | | | | | | | 20,348.00 |
| Covering | | | | | | | |
| Packaging | | Domestic Freight | Int'l Freight | Other Charges (Specify) | | Insurance | |
| Total Extra Charges | | Total Gross Price 20,348.00 | | Discount | | Advance Payment | |
| We certify that this invoice is true and  | | Total Packages 1 BOX | Total Shipped 4 EA | Total Weight 8 LBS | Total Invoice USD | 20,348.00 | |

| | | | | | | |
|--|---|--|--|--|-------------------------|-----------|
| EXPORTER Paragon Energy Solutions 7410 Pebble Drive Fort Worth TX 76118 US | | Exporter No. 1 | Export References PR24000812-1 | Date 09/17/2024 | Ship Date 09/17/2024 | |
| CONSIGNEE NAWAH ENERGY COMPANY BARAKAH NUCLEAR POWER PLANT PO BOX 112040 ABU DHABI UNITED ARAB EMIRATES 00000 ABU DHABI | | Consignee No. 862 | Export References Please find attached the following documents: 1. Export Worksheet 2. Commercial Invoice EIN# 82-2483099 EAR 99 NLR | | | |
| BROKER | | Broker No. | <h2 style="text-align: center;">SHIPPER'S LETTER OF INSTRUCTIONS</h2> | | | |
| | | | | | | |
| Country of Origin USA | Place of Delivery UAE | Freight Charges Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> Prepaid & Charge <input type="checkbox"/> 3rd Party <input type="checkbox"/> | | | | |
| Seaport of Lading | Seaport of Discharge | Customs Charges Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> Prepaid & Charge <input type="checkbox"/> 3rd Party <input type="checkbox"/> | | | | |
| Local Carrier | Exporting Carrier | Vessel | Bill of Lading Number | Letter of Credit Number | | |
| Containerized Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | Routed Transaction Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | Export Declaration Attached <input type="checkbox"/> Filed Paper <input type="checkbox"/> NA <input checked="" type="checkbox"/> | | Type of Shipment Direct <input checked="" type="checkbox"/> Consolidation <input type="checkbox"/> | | |
| Hazardous Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | Status O... <input checked="" type="checkbox"/> Ag... <input type="checkbox"/> | Filed Online <input type="checkbox"/> | | In Case of Inability to Deliver Shipment Abandon <input checked="" type="checkbox"/> Return To Shipper <input type="checkbox"/> | | |
| Deliver To <input type="checkbox"/> | | | | | | |
| No. | Item | HS Code | Goods Description | Quantity UM | Weight UM | Invoice |
| 1 | CNT-35-76 | 9106.90.30.00 | TIMER, EQUALIZING P/N CNT-35-76 | 4 EA | LBS | 20,348.00 |
| Total Shipped 4 EA | | Total Weight 0 | | Total Invoice USD 20,348.00 | | |
| Additional Instructions | | | | | | |
| NOTE: The Shipper or his Authorized Agent hereby authorizes the above named Company, in his name and on his behalf, to prepare any export documents, to sign and to accept any documents relating to said shipment and forward this shipment in accordance with the conditions of carriage and the tariffs of the carriers employed. The shipper guarantees payment of all collect charges in the event the consignee refuses payment. Hereunder the sole responsibility of the Company is to use reasonable care in the selection of carriers, forwarders, agents and others to whom it may entrust the shipment. | | | | Insurance <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | | |
| Name CHRISTOPHER LICON Title MATERIAL MANAGER Telephone 8172840077 Email kpolicy@paragones.com | | | | If Shipper has requested insurance as provided for at the left hereof, shipment is insured in the amount indicated (recovery is limited to actual loss) in accordance with the provisions as specified in the Carrier's Tariffs. Insurance is payable to Shipper unless payee is designated in writing by the shipper. | | |