This invo	ice must	be comple	ted in Englis	sh.	0	COMM	ERC	CIAL IN	IVOICE			Pag	ge <u>1</u> of <u>1</u>	
EXPORTER:								Ship Date:						
Tax ID#: EIN 232812439 Contact Name: ZACHARY LOITFELLNER								10/28/2024 Air Waybill No. / Tracking No.:						
Telephone No.: 215-788-2700 - OPTION 5 E-Mail: ZACHARY.LOITFELLNER@GENTELL.COM								Invoice No.:	Pur	chase Order No.:				
Company Name/Address:								Payment Ter	ms:	Bill	of Lading:			
GENTELL 180 RITTENHOUSE CIRCLE BRISTOL, PA 19007								-						
								Purpose of S COMMERCI	•					
		ITED STATE	s											
Parties to Transaction: Related Non-Related														
CONSIGNEE:								SOLD TO / IMPORTER (if different from Consignee):						
Tax ID#: E								🖌 Same a	s CONSIGNEE:					
Contact Name: MOEZ ALI Telephone No.: 96524747875								Tax ID#: SELECT DOWN ARROW FOR OPTIONS						
E-Mail: medical@natmed.com.kw														
Company Name/Address:								Company Name/Address:						
National Medical Consumable Industries Co. KSCC Block #10, Plot # 1-5														
North Subhan HAWALLI														
Country/Territory: Kuwait								Country/Territory:						
If there is a designated broker for this shipment, please provide contact information.								Contact Name						
	Taxes Pay	/able by	Exporter	Consigne		Tel. No her If Of		ase specify	Conta	ICTINAME				
No. of Packages	No. of Units	Gross Weight				ption of Goo			Harmonized Tariff Number	Country of Manufacture	Unit Value		Total Value	
1	300	2.42	BOXES	GEN13482 Calcium Alginate Ag (Silver Dressing GAUZE DRESSING LOT #24082583 / EXPIRATION: 9/27 Manufacturing Date: 9/6/2024				4" x 8"	3005.90.0000			65.00	19,500.00	
										USA				
													0.00	
													0.00	
													0.00	
Total Pkgs	Total Units	Total Net Weight	(Indicate LBS/KGS)	Total Gross Weight	(Indicate LBS/KGS)	Terms of Sale:	Select	Down Arrow Fo	or Options		Subtotal:		19,500.00	
1	300	600	LBS	726	LBS	-					Insurance:		0.00	
											Freight:		0.0	
	Swift Code: MIPEUS32 Bank Name: Mid Penn Bank, Address: 349 Union St Millersburg, PA 17061 Routing: 031308807 Account: 19121334 Currency: USD												0.0	
Declaration Statement(s):											Handling:		0.0	
											Other:		0.00	
I declare that all the information contained in this invoice to be true and correct.											Invoice Total:		19,500.00	
	Originator or Name of Company Representative if the invoice is being completed on behalf of a company or individual: ZACHARY LOITFELLNER											:	USE	