


# Commercial Invoice

<b>EXPORTER</b> Paragon Energy Solutions 7410 Pebble Drive Fort Worth TX 76118 US		<b>EXPORTER No</b> 1	<b>Date</b> 04/04/2025	<b>Export References</b> PR23000334W-1			
			<b>Invoice Number</b> 4500007385	<b>Purchase Order Number</b> 4500007385			
			<b>Bill of Lading Number</b>	<b>Letter of Credit Number</b>			
<b>CONSIGNEE</b> NAWAH ENERGY COMPANY BARAKAH NUCLEAR POWER PLANT PO BOX 112040 ABU DHABI UNITED ARAB EMIRATES 00000 ABU DHABI		<b>CONSIGNEE No</b> 862	<b>BUYER</b> NAWAH ENERGY COMPANY BARAKAH NUCLEAR POWER PLANT PO BOX 112040 ABU DHABI UNITED ARAB EMIRATES 00000 ABU DHABI			<b>BUYER No</b> 862	
<b>NOTIFY</b> SUDHAKARAN THOOKATH 97123061918		<b>NOTIFY No</b>	<b>Country of Origin</b> USA	<b>Place of Delivery</b> UAE			
			<b>Commercial Terms</b> NET 30 DAYS	<b>INCO</b> EXW			
			<b>Other Terms</b>				
<b>Carrier</b>		<b>Vessel</b>					
<b>Seaport of Lading</b>		<b>Seaport of Discharge</b>					
Item	CO	HS Code	Description	Quantity	UM	Price	Invoice
266DRHHSRR	US	9032.89.60.50	TRANSMITTER,PRESSURE:DIFF.,4-20mA ABB P/N: 266DRHHSRRA1L1B2C1C6H3	1	EA	14,223.00	14,223.00
						Page Total	14,223.00
Covering							
Packaging		Domestic Freight	Int'l Freight	Other Charges (Specify)			Insurance
Total Extra Charges		Total Gross Price		Discount		Advance Payment	
		14,223.00					
We certify that this invoice is true and		Total Packages	Total Shipped	Total Weight	Total Invoice		
 Authorized Signature		1 BOX	1 EA	34 LBS	USD 14,223.00		

<b>EXPORTER</b> Paragon Energy Solutions 7410 Pebble Drive Fort Worth TX 76118 US		<b>Exporter No.</b> 1	<b>Export References</b> PR23000334W-1	<b>Date</b> 04/04/2025	<b>Ship Date</b> 04/04/2025																																				
<b>CONSIGNEE</b> NAWAH ENERGY COMPANY BARAKAH NUCLEAR POWER PLANT PO BOX 112040 ABU DHABI UNITED ARAB EMIRATES 00000 ABU DHABI		<b>Consignee No.</b> 862	<b>Export References</b> Please find attached the following documents: 1. Export Worksheet 2. Commercial Invoice  EIN# 82-2483099 EAR 99 NLR																																						
<b>BROKER</b>  		<b>Broker No.</b>  	<h2 style="text-align: center;">SHIPPER'S LETTER OF INSTRUCTIONS</h2>																																						
<b>Country of Origin</b> USA	<b>Place of Delivery</b> UAE	<b>Freight Charges</b> Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> Prepaid & Charge <input type="checkbox"/> 3rd Party <input type="checkbox"/>																																							
<b>Seaport of Lading</b> 	<b>Seaport of Discharge</b> 	<b>Customs Charges</b> Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> Prepaid & Charge <input type="checkbox"/> 3rd Party <input type="checkbox"/>																																							
<b>Local Carrier</b> 	<b>Exporting Carrier</b> 	<b>Vessel</b> 	<b>Bill of Lading Number</b> 	<b>Letter of Credit Number</b> 																																					
<b>Containerized</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<b>Routed Transaction</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<b>Export Declaration</b> Attached <input type="checkbox"/> Filed Paper <input type="checkbox"/> NA <input checked="" type="checkbox"/>		<b>Type of Shipment</b> Direct <input checked="" type="checkbox"/> Consolidation <input type="checkbox"/>																																					
<b>Hazardous</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<b>Status</b> O... <input checked="" type="checkbox"/> Ag... <input type="checkbox"/>	Filed Online <input type="checkbox"/>		<b>In Case of Inability to Deliver Shipment</b> Abandon <input checked="" type="checkbox"/> Return To Shipper <input type="checkbox"/>																																					
<table border="1"> <thead> <tr> <th>No.</th> <th>Item</th> <th>HS Code</th> <th>Goods Description</th> <th>Quantity</th> <th>UM</th> <th>Weight</th> <th>UM</th> <th>Invoice</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>266DRHHSR</td> <td>9032.89.60.50</td> <td>TRANSMITTER,PRESSURE:DIFF.,4-20mA ABB P/N: 266DRHHSRRSA1L1B2C1C6H3</td> <td>1</td> <td>EA</td> <td>LBS</td> <td></td> <td>14,223.00</td> </tr> <tr> <td colspan="2">Total Shipped</td> <td colspan="2">Total Weight</td> <td colspan="2">Total Invoice</td> <td colspan="3"></td> </tr> <tr> <td colspan="2">1 EA</td> <td colspan="2">0</td> <td colspan="2">USD</td> <td colspan="3">14,223.00</td> </tr> </tbody> </table>						No.	Item	HS Code	Goods Description	Quantity	UM	Weight	UM	Invoice	1	266DRHHSR	9032.89.60.50	TRANSMITTER,PRESSURE:DIFF.,4-20mA ABB P/N: 266DRHHSRRSA1L1B2C1C6H3	1	EA	LBS		14,223.00	Total Shipped		Total Weight		Total Invoice					1 EA		0		USD		14,223.00		
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<b>Additional Instructions</b>  																																									
<b>NOTE:</b> 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.				<b>Insurance</b> <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES																																					
Name CHRISTOPHER LICON Title MATERIAL MANAGER Telephone 8172840077				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.																																					
Email kpolicy@paragones.com				