

## Commercial Invoice

Date of Export: <b>5/20/2025</b>				Export References (i.e. order no., invoice no., etc): <b>INV25085860/863/865</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	
11	11	Bx	Dental Implants 9021218000	13000	EA	250	\$36.30	\$471,870.00	
			Dental Instruments 9018490000	58	EA	42	\$0.00	\$0.00	
			Dental Prosthetics 9021218000	14274	EA	250	\$16.34	\$233,194.35	
	Total No. of Pkgs	10 @ 24 x 20 x 20 ( 9 @ 50 lbs, 1 @ 63lbs)				Total Weight Lbs		Total Invoice Value	
	11	1 @ 18 x 18 x 18 ( 29 lbs)				542		\$705,064.35	
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:  5/20/2025		<input checked="" type="checkbox"/> FCA	
								<input type="checkbox"/> C&F	
								<input type="checkbox"/> CIF	
Jolen Ware International Distribution Specialist									