COMMERCIAL INVOICE

(Please complete in English print)

INTERNATIONAL AIR WAYBILL NO.

(NOTE: All shipments must be accompanied by a FedEx International Air Waybill & two duplicate copies of CI.)

DATE OF EXPORTATION

2024/4/1

SHIPPER'S EXPORT REFERENCES

(i.e., order no., invoice no.) MM1229693

SHIPPER / EXPORTER (complete name, address, telephone, Business Registration No./ Customs / Tax ID No. e.g. GST / RFC / VAT / IN / EIN / ABN / SSN, or as locally required)

311 International Trade Pkwy
Ship8 Inc
Port Wentworth
GA - 31407
US

CONSIGNEE (complete name, address, telephone, Business Registration No./ Customs / Tax ID No. e.g. GST / RFC / VAT / IN / EIN / ABN / SSN, or as locally required)

Carol Trofanenko
COMP 5 SITE 9 RR 2
33006 RGE RD 64
SUNDRE, AB T0M1X0
403-638-2463

COUNTRY OF EXPORT

US

REASON FOR EXPORT
(e.g. personal gift, return for repair)

COUNTRY OF ULTIMATE DESTINATION

CA

IMPORTER - IF OTHER THAN CONSIGNEE
(complete name, address and telephone)

COUNTRY OF ORIGIN	MARKS/ NO'S.	NO. OF PKGS	TYPE OF PACKAGING	FULL DESCRIPTION OF GOODS	HS CODE	QTY.	UNIT OF MEASURE	WEIGHT lb	UNIT VALUE USD	TOTAL VALUE
		1	Carton	Description: Not Applicable - Item #SQU-124095(SQU-124095) Mini Squishable Haunted Plague Doctor & Nurse Set (1.0000pcs per Carton, total ship 1 Carton) Material Composition: N/A		1	EA	5.004409	59.99	59.99
		TOTAL PKGS						**TOTAL WEIGHT**	**CURRENCY**	**TOTAL INVOICE VALUE**
		1						**5.00**	**59.99**	**59.99**

Duties and Taxes Payable by:

Exporter ☐
Consignee ☑

Terms of Sale	Check one
☑ Pre-paid	☐ F.O.B.
☐ T/T	☐ C & F
☐ Others	☐ C.I.F.
Check if applicable	

I DECLARE ALL THE INFORMATION CONTAINED IN THE INVOICE TO BE TRUE AND CORRECT.

SIGNATURE OF SHIPPER/EXPORTER

Jonah Panitz

NAME (PLEASE PRINT) **TITLE (PLEASE PRINT)** **DATE**