

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.)

| | |
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| <p>DATE OF EXPORTATION 2025/4/1</p> | <p>SHIPPER'S EXPORT REFERENCES (i.e., order no., invoice no.) #1732</p> |
| <p>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)</p> <p>311 International Trade Pkwy Ship8 Inc Port Wentworth GA - 31407 US</p> | <p>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)</p> <p>Rinus Poot Amersfoortsestraat 98 Barneveld, NL 3772CK</p> |
| <p>COUNTRY OF EXPORT US</p> | <p>IMPORTER - IF OTHER THAN CONSIGNEE (complete name, address and telephone)</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> |
| <p>REASON FOR EXPORT (e.g. personal gift, return for repair)</p> | |
| <p>COUNTRY OF ULTIMATE DESTINATION NL</p> | |

| 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 #VSMN004RED (VSMN004RED) VESSILS MINI KAMADO GRILL RED (4.0000pcs per Carton, total ship 1 Carton) Material Composition: N/A | | 4 | EA | 6.605820 | 162.51 | 650.04 |
| | | TOTAL PKGS | | | | | | TOTAL WEIGHT | CURRENCY | TOTAL INVOICE VALUE |
| | | 1 | | | | | | 6.61 | 162.51 | 650.04 |

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

| | |
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| <p>Payment Method</p> <p><input type="checkbox"/> L/C</p> <p><input type="checkbox"/> T/T</p> <p><input type="checkbox"/> Others</p> <p>Check if applicable</p> | <p>Check one</p> <p><input type="checkbox"/> F.O.B.</p> <p><input type="checkbox"/> C & F</p> <p><input type="checkbox"/> C.I.F.</p> |
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SIGNATURE OF SHIPPER/EXPORTER

NAME (PLEASE PRINT)

TITLE (PLEASE PRINT)

DATE