

YOUR COMPANY LETTERHEAD OR LOGO (if available)

## COMMERCIAL INVOICE

DATE OF EXPORT	TERMS OF SALE	E-MAIL ADDRESS	CURRENCY		
	<b>F.O.B</b>		<b>US DOLLAR</b>		
SHIPPER / EXPORTER		CONSIGNEE			
		KORR Medical Technologies Inc. 3487 West 2100 South Suite 300 Salt Lake City, UT 84119 United States Of America P: 801-483-2080 E-mail: Shipping@korr.com Tax ID: 870514439			
COUNTRY OF ULTIMATE DESTINATION		IMPORTER (IF DIFFERENT THAN CONSIGNEE)			
<b>United States</b>		Same as Consinee			
COUNTRY OF MANUFACTURE					
<b>United States</b>					
TRACKING NUMBER					
FULL DESCRIPTION OF GOODS	TARRIF CODE	WEIGHT (LBS.)	QUANTITY	UNIT VALUE	TOTAL VALUE
Non-Medical, Non-Hazardous Gas Analyzer return to KORR for calibration/repair. KORR is Manufacturer.	9027.80.9900	15.00	1	\$ 500.00	\$ 500.00
<b>SUB-TOTAL</b>		15.00	1		\$ 500.00
TOTAL NO. OF PACKAGES			FREIGHT COSTS		
			DISCOUNT		\$ (500.00)
			ADDITIONAL COSTS		
<i>These commodities, technology or software were exported from the United States in accordance with the Export Administration regulations. Diversion contrary to US Law prohibited.</i>			<b>TOTAL INVOICE VALUE \$0.00</b>		
<i>I hearby certify that this invoice shows the actual price of goods described, that no other invoice has been issued, and that all particulars are true and correct.</i>					
SIGNATURE OF SHIPPER / EXPORTER: _____ DATE: _____					
PRINT NAME HERE					