

Invoice

依頼主, sender 名前 Name:	作成日, date : (月/日/年)
	作成場所, Place : Japan
住所 address:	郵便物番号、Mail Item No.
電話番号 Tel :	輸送手段, Shipping Per:
宛先 shipping address: ZRT Laboratory 8605 SW Creek Side Place Beaverton, OR 97008, US Phone: 1-503-466-2445 Fax: 1-503-466-1636	支払い条件 Terms of payment
	備考 Remarks
	<input type="checkbox"/> 有償 commercial values <input type="checkbox"/> 無償 Non commercial values <input type="checkbox"/> 贈物 gift <input type="checkbox"/> 商品見本 sample <input checked="" type="checkbox"/> その他 others

内容品の記載 Description	正味重量 Net weight	数量 Quantity	単価(ドル) Unit price Currency USD	合計額 Total amount
Exempt the human saliva and blood specimen: We certify that materials are : Human origin saliva with/ without blood or urine sample. NOT INFECTIOUS UN 2814 dose NOT apply. For Laboratory test only, not for sale. Human material not recombinant, not cultured. These specimens are for diagnostic testing purpose, will be discarded after use and no commercial value. The value for customs purpose to \$1.00	kg	1	\$100.00	\$100.00
Total	Kg	1	\$100.00	\$100.00

郵便物の個数 Number of pieces 1
 総重量 Gross weight kg
 原産国 Country of origin Japan

署名 Signature

Sending date (月/日/年)
