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| --- | --- | --- | --- | --- | --- |
| **Commercial Invoice** | | | | | |
| Shipper Name: University of Luxembourg  Luxembourg Centre for Systems Biomedicine | | | Consignee Name: | | |
| Contact person: | | | Contact person: | | |
| Street Address: 6 avenue du Swing  Biotech 2 | | | Street Address: | | |
| City: Belvaux | Postal Code: L-4367 | | City: | | Postal Code: |
| Country: Luxembourg | Email address: | | Country: | | Email address: |
| Telephone number: +352466644 | | | Telephone Number: | | |
| Tax ID# LU19805732 | | | Tax ID Number (EIN) | | Incoterms: EXW |
| Other Information: Samples | | | Total Gross Weight in Kilos | |  |
| **Complete and Accurate Commodity Description** | | **HS Code** | **Country of Manufacture** | **Quantity,**  **Unit of Measure** | **Total Value**  **(EUR)** |
|  | |  | LUXEMBOURG |  | 1 |
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| **For research purpose only** | | | Total Value (EUR) | |  |
| Signature and Title of Authorized Person Date | | | **We certify that the samples are Non-hazardourd, Non-infectious that have not been exposed to any pathogens, such as viruses of bacteria.** | | |