

Proforma Invoice

DATE OF EXPORTATION _____

SHIPPER/EXPORTER (complete name and address) _____

COUNTRY OF EXPORT _____

COUNTRY OF MANUFACTURE _____

COUNTRY OF ULTIMATE DESTINATION
CANADA

EXPORT REFERENCES (ie. order #, invoice #, etc.) _____

CONSIGNEE (complete name and address)
**Impact Genetics, Dynacare
115 Midair Court
Brampton, ON L6T 5M3**

IMPORTER if other than Consignee _____

INTERNATIONAL WAYBILL # _____

# PKGS	TYPE OF PACKAGING	FULL DESCRIPTION OF GOODS MARKS AND NUMBERS	WEIGHT KG	QUANTITY UNIT OF MEASURE	UNIT VALUE	TOTAL VALUE
1	Clinical Pak	EXEMPT HUMAN SPECIMEN Blood DNA from human blood Human tissue FOR CLINICAL DIAGNOSTIC TESTING NON-TOXIC NON-HAZARDOUS NON-INFECTIOUS				\$10.00

TOTAL # OF PKGS **1**

TOTAL WEIGHT **0.00**

TOTAL INVOICE VALUE **\$10.00**

These commodities are licensed for the ultimate destination shown.

- Diversion contrary to United States law is prohibited.
- I declare all the information contained in this invoice to be true and correct.

SIGNATURE OF SHIPPER/EXPORTER (print name and title and sign) _____



impact genetics

A Division of Dynacare

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