



**Customs declaration: – Please enclose in the pouch**

# INVOICE

1枚目/1枚中

インボイス作成日 (Date) : 2024 / 01 / 02

**作成地(Place) :**Tokyo

**依頼主 (Sender):**

Vibex Pharmaceutical Official Mall (Vibex Seiyaku)  
Vibex Pharmaceutical Official Mall  
Time 24 Building  
2-4-32 Aomi  
Koto-ku  
Tokyo  
135-0064, JAPAN

郵便物番号 (Mail Item No.): EN296055131JP

**送達手段 (Shipped Per) :**E M S

**支払い条件(Terms of Payment):**

備考 (Remarks):

☐有償 (Commercial value)

☒ 無償 (No Commercial value)

☐ 贈物 (Gift)   ☐ 商品見本 (Sample)   ☐ その他 (Other)

Invoice No.

**お届け先 (Addressee):**

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TEL 010-3638-7258

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[illegible]

F.O.B. JAPAN

郵便物の個数 (Number of pieces) :

総重量 (Gross weight) g

**署名(Signature)**

