





## INVOICE

1枚目/1枚中

インボイス作成日(Date) :2024 / 10 / 14

作成地(Place) :Tokyo

ご依頼主 (Sender): Vibex Pharmaceutical Korea (Vibex Seiyaku) Vibex Pharmaceutical Korea Time 24 Building 2-4-32 Aomi Koto-ku Tokyo 135-0064, JAPAN  TEL +81-70-8028-0952 FAX	郵便物番号 (Mail Item No.): EN346061517JP
	送達手段 (Shipped Per) :EMS
	支払い条件(Terms of Payment):
	備考 (Remarks): <input type="checkbox"/> 有償 (Commercial value) <input checked="" type="checkbox"/> 無償 (No Commercial value) <input type="checkbox"/> 贈物 (Gift) <input type="checkbox"/> 商品見本 (Sample) <input type="checkbox"/> その他 (Other) Invoice No.
お届け先 (Addressee): Lee Jeong-won Lee Jeong-won 108.1302 Room, The Felice Humanville, 235, Sunooul 1-ro, Hwaseong-si, Gyeonggi-do 18238, KOREA  TEL 010-3307-5137 FAX 010-3307-5137	

内容品の記載 (Description)	原産国 (Country of origin)	正味重量 (Net Weight) g	数量 (Quantity)	単価 (Unit Price)	合計額 (Total Amount)
Health food			3	USD 2.34	USD 7.02
総合計 (Total)			3		USD 7.02

F.O.B.JAPAN

郵便物の個数 (Number of pieces) :

総重量 (Gross weight) g :

署名(Signature)

Invoice: 1 Please enclose in the pouch



\* E N 3 4 6 0 6 1 5 1 7 J P \*

ご依頼主控え (Sender's Copy①)

JAPAN 職権により開くことがあります May be opened officially JAPAN POST

お問い合わせ番号 (item number) EN 346 061 517 JP

Main shipping form containing sender and addressee information, item details, and postage amounts.

EMS受取書 (Sender's Copy②)

Sender's copy of the EMS receipt, including address and date stamp.

EMS受付局控 (Post office's copy)

Post office's copy of the EMS receipt, including item details, postage, and QR code.