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# INVOICE

1枚目 / 1 枚中

インボイス作成日 (Date) : 2022 / 10 / 07

作成地(Place) :Tokyo

|                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>ご依頼主 (Sender):</b><br/> Vibex Pharmaceutical Official Mall (Vibex Seiyaku)<br/> Vibex Pharmaceutical Official Mall<br/> Time 24 Building<br/> 2-4-32 Aomi<br/> Koto-ku<br/> Tokyo<br/> 135-0064, JAPAN</p> <p>TEL +82-70-8094-1892      FAX</p> | <p><b>郵便物番号 (Mail Item No.):</b> EN214714930JP</p> <p><b>送達手段 (Shipped Per) :</b> E M S</p> <p><b>支払い条件 (Terms of Payment):</b></p> <p><b>備考 (Remarks):</b><br/> <input type="checkbox"/> 有償 (Commercial value)<br/> <input checked="" type="checkbox"/> 無償 (No Commercial value)<br/> <input type="checkbox"/> 贈物 (Gift)   <input type="checkbox"/> 商品見本 (Sample)   <input type="checkbox"/> その他 (Other)</p> <p>Invoice No.</p> |
| <p><b>お届け先 (Addressee):</b><br/> Lee Ki-won<br/> Lee Ki-won<br/> 103-2002, 60 Jamwon-ro, Seocho-gu, Seoul<br/> (Jamwon-dong, Sinbanpozai)<br/> 06521, KOREA</p> <p>TEL 010-3697-5825      FAX 010-3697-5825</p>                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                  |

[illegible]

F.O.B. JAPAN

郵便物の個数 (Number of pieces) :

**総重量** (Gross weight) g :

**署名(Signature)**

[illegible]