Mendelssohn Commerce

1600 Courtneypark Dr. East Mississauga, ON Canada L5T 2W8

Tel: 905-673-5445 Fax 905-673-2574 1-800-665-4628 www.mend.com



Customs Clearance Services

10th Annual Canadian Association for Neuroscience Meeting May 29th – June 1st, 2016 @ Sheraton Centre Toronto

Mendelssohn Commerce has been appointed as the official customs broker for the 10th **Annual Canadian Association for Neuroscience Meeting** to be held at the **Sheraton Centre Toronto, May** 29th – **June** 1st, 2016. For all customs needs, we recommend you deal directly with Mendelssohn Commerce.

For Customs inquiries please contact:

Lowsha Kirubaharan	lkirubaharan@mend.com		
Tel: 416-863-9339 Ext. 224	Fax: 416-863-5149	Cell: 416-903-7499	

Prior to shipping, the Order Form and Canada Customs Invoice (CCI) should be completed and forwarded to our office (Attn: Lowsha Kirubaharan, lkirubaharan@mend.com). Three copies of the CCI must accompany the shipment. Please fax the 'Credit Card Authorization Form' to our toll free fax number 1-855-762-1145.

HAND CARRYING or PRIVATE VEHICLE

For exhibitors who will be arriving by plane or in a private vehicle with their goods, it is necessary that you notify Mendelssohn Commerce six weeks in advance so that the proper documentation (Pre-Arrival Processing System - PAPS) can be prepared for the appropriate border crossing.

Prior to shipping your goods, please fax all appropriate customs documents to our office at 416-591-8589. It is important to provide Mendelssohn Commerce with your carrier's name and tracking number.

COF: Customs Order Form: Mandatory for customs clearance. Without this document Mendelssohn Commerce does not have authorization to clear shipments. This form also gives the coordinator all the information for the return shipment.

CCI: Canada Customs Invoice: is the mandatory document for anyone shipping exhibit/registration material. Three (3) copies should accompany the shipment (either provide them to the driver picking up your material or tape them onto the shipment).

**When shipping electronic equipment back to the USA after the congress, FCC and FDA forms can apply. Please speak to Mendelssohn Commerce about this.



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Order Form

Date:

01/29/2014

Customs and Transportation Services

Please accept this as authority for ICECORP Logistics Inc. dba Mendelssohn Commerce of 1600 Courtneypark Dr. E., Mississauga, ON L5T 2W8; business number 121767677RM0001, a Customs Broker licensed under the Customs Act, to act as my true and lawful attorney to transact on my behalf all matters relating to the import and export of goods, as outlined in ICECORP Logistics Inc. Standard Trading Conditions, including but not limited to:



The release of and accounting for goods, document and data preparation, payment of, and refund, of all government duties, taxes and levies in respect of imported and exported goods released or to be released; and The transportation, warehousing, and distribution of such goods.

2.

COMMERCE

One Source. One Solution.

		tics Inc. dba Mendelssohn Commerce full p			oint a sub-age	nt, where required.			
This authority is granted for all shipments in relation to the event and/or shipment(s) detailed below Event Name: INT'L MARKETING EVENT				Event Dates: APR. 15-17, 2014					
Services Required: (please check one)									
☐ Custom	s Clearance and Tran	sportation Customs Cle	earance C	Only		☐ Transportation O	nly		
Shipper	Information			Deliver	v Inforn	nation			
Company Name: ABC DISTRIBUTING COMPANY				Delivery Information Exhibitor/Company Name: ABC DISTRIBUTING COMPANY					
	S. Tax Identification #:					MARKETING EVENT	Booth #:		
	25 ELM STREET			Facility Name: EVENT FACILITY					
D	OCK DOOR #2			Address: 278 SOMEWHERE PLACE					
City CLUC	AGO Province/S	toto: II Dootol/Zin: CCC		City: TORONTO Province/State: ON Postal/Zip: M5M 2B2					
City: CHICA	ne: JOHN DOE	tate: IL Postal/Zip: 6666 Tel: 708-555-120		City: TORONTO Province/State: ON Postal/Zip: M5M 2B2 On-Site Contact: SANDY SMITH Cell #:708-555-1234					
	DE@DOMAIN.COM	Fax: 708-555-22		E-mail: SSMITH@DOMAIN.COM					
Return F			nner			ing Information	□ Same	as Shipper	
	ame: ABC DISTRIBUT		рроі			BC DISTRIBUTING COMPA			
	S. Tax Identification #:			Importer a	# (if applic	able): 123456789RT000	1	THING DELT I	
	25 ELM STREET			Address:					
	OCK DOOR #2								
City: CHIC				City: CHI		Province/State: IL	Postal/Zip		
	me: JOHN DOE	Tel: 708-555-120	00	Contact N			Tel: 708-5		
	DE@DOMAIN.COM			E-mail: JS	SMITH@D	OMAIN.COM	Fax: 708-	555-1266	
Shipmen	t Information								
		Issohn Commerce): MENDELSSOHN							
Pick-Up Dat	te: APR. 03/14	Hours of Operation: 8:00 AM	- 5:00 PM	Delivery D	ate: APR	. 14/14 Time: 11:	00 AM		
Requested	Service Level:	☐ Air ☐ 2 nd Day	X	Truck					
Additional S	ervices Required:	☐ Lift Gate ☐ Inside Pi	ck-Up/De	livery					
# of Pieces	Box/Crate/Skid etc.		Length	n Width	Height		Per Piece	Total	
2	SKIDS	@ Dimensions (Inches) Each:		48	48	@ Weight (lbs) Each:	375	750	
4	CRATES	@ Dimensions (Inches) Each:		47	60	@ Weight (lbs) Each:	500	2,000	
		@ Dimensions (Inches) Each:	-			@ Weight (lbs) Each:	 		
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6	Total	& Differsions (friches) Lacri.					tal Weight:	2,750	
		and Walter					tai TTOIGITE	2,700	
This shipment is pound multiplied	d by the number of pounds for	r liability, direct with the carrier. Maximum or that part of the shipment lost or damage ms and conditions of liability for loss/damage.	d, but not les	ss than \$50.00	per shipment	UNLESS additional Cargo Insura	ance has been a	arranged with	
Terms of	FPayment and S	Security Deposit (Must b	e com	pleted)					
		PCI) compliance rules, we will on as been provided. Please check						parate	
☐ Ir		Authorization or Preliminary Invol Authorization or Preliminary Invol				s been e-mailed. I have p	provided Cre	edit	
	nd Conditions								
This order is plated loss, damage at responsible for acts of god, strill have made other assumed losses	aced with the specific unders nd/or theft to our merchandis damage to uncrated materia kes, lock outs of any kind be er appropriate insurance arra	tanding that we hereby release ICECORP se and property, no matter how caused, an ls, improperly packaged goods or conceale yond its control. 3) Mendelssohn Comme ingements and paid applicable charges. 4 or any collateral costs which may result from.	d we have in ed damage. rce liability is Mendelsso	nsured all such 2) Mendelssol s outlined in the ohn Commerce	properties be nn Commerce above Cargo shall not be I	ing handled; 1) Mendelssohn Co will not be responsible for any lo b Insurance / Declared Value sec liable to any extent whatsoever fo	mmerce shall no coss/damage/delection. We are se for the actual, por	ot be lay due to fire, elf-insured, or tential or	
Client Signature I have read and agree to the Terms and Conditions of this Contract.				Accepted by Mendelssohn Commerce					
i nave read and a	agree to the Terms and Conditi	ons of this Contract.							
Signature:	JOE SMACIN	<i>i</i>		Signature:					
Name: JOE				Name:					
Title: OWNER / PRESIDENT Titl				Title:					

Date:

Order Form

Customs and Transportation Services

Please accept this as authority for ICECORP Logistics Inc. dba Mendelssohn Commerce of 1600 Courtneypark Dr. E., Mississauga, ON L5T 2W8; business number 121767677RM0001, a Customs Broker licensed under the Customs Act, to act as my true and lawful attorney to transact on my behalf all matters relating to the import and export of goods, as outlined in ICECORP Logistics Inc. Standard Trading Conditions, including but not limited to:



The release of and accounting for goods, document and data preparation, payment of, and refund, of all government duties, taxes and levies in respect of imported and exported goods released or to be released; and

The transportation, warehousing, and distribution of such goods.

In signing this form, I grant ICECORP Logistics Inc. dba Mendelssohn Commerce full power and authority to appoint a sub-agent, where required.

This authority is granted for all shipments in relation to the event and/or shipment(s) detailed below. Event Name: **Event Dates:** Services Required: (please check one) Customs Clearance and Transportation Customs Clearance Only ☐ Transportation Only **Shipper Information Delivery Information** Company Name: Exhibitor/Company Name: IRS # or U.S. Tax Identification #: Booth #: **Event Name:** Facility Name: Address: Address: City: Province/State: Postal/Zip: Province/State: Postal/Zip: City: On-Site Contact: Cell #: Contact Name: Tel: E-mail: Fax: E-mail: **Billing / Invoicing Information Return Freight** ☐ Same as Shipper ☐ Same as Shipper Company Name: Company Name: IRS # or U.S. Tax Identification #: Importer # (if applicable): Address: Address: Province/State: City: Province/State: Postal/Zip: City: Postal/Zip: Contact Name: Tel: Contact Name: Tel: E-mail: E-mail: Fax Shipment Information Carrier Name (if not using Mendelssohn Commerce): Contact Name: Tel: Pick-Up Date: Hours of Operation: **Delivery Date:** Time: ☐ 2nd Dav □ Air ☐ Truck Requested Service Level: Additional Services Required: ☐ Lift Gate ☐ Inside Pick-Up/Delivery # of Pieces | Box/Crate/Skid etc. Length Width Height Per Piece Total @ Weight (lbs) Each: @ Dimensions (Inches) Each: @ Dimensions (Inches) Each: @ Weight (lbs) Each: @ Weight (lbs) Each: @ Dimensions (Inches) Each: @ Dimensions (Inches) Each: @ Weight (lbs) Each: @ Dimensions (Inches) Each: @ Weight (lbs) Each: Total Total Weight: Cargo Insurance / Declared Value This shipment is covered under basic carrier liability, direct with the carrier. Maximum liability (declared value for carriage of this shipment) is agreed to and understood to be \$0.50 per pound multiplied by the number of pounds for that part of the shipment lost or damaged, but not less than \$50.00 per shipment UNLESS additional Cargo Insurance has been arranged with Mendelssohn Commerce. Subject to the terms and conditions of liability for loss/damage, stated below. Please contact Mendelssohn Commerce for more Cargo Insurance information. Terms of Payment and Security Deposit (Must be completed) **Due to Payment Card Industry (PCI) compliance rules, we will only be able to obtain your Credit Card Number by phone or fax. A separate Credit Card Authorization form has been provided. Please check off the payment method that has been completed for this order: Completed Credit Card Authorization or Preliminary Invoice has been faxed. Incomplete Credit Card Authorization or Preliminary Invoice (without Credit Card #) has been e-mailed. I have provided Credit Card # by telephone. Terms and Conditions This order is placed with the specific understanding that we hereby release ICECORP Logistics dba Mendelssohn Commerce (Mendelssohn Commerce) and/or agents from all liability for loss, damage and/or theft to our merchandise and property, no matter how caused, and we have insured all such properties being handled; 1) Mendelssohn Commerce shall not be responsible for damage to uncrated materials, improperly packaged goods or concealed damage. 2) Mendelssohn Commerce will not be responsible for any loss/damage/delay due to fire, acts of god, strikes, lock outs of any kind beyond its control. 3) Mendelssohn Commerce liability is outlined in the above Cargo Insurance / Declared Value section. We are self-insured, or have made other appropriate insurance arrangements and paid applicable charges. 4) Mendelssohn Commerce shall not be liable to any extent whatsoever for the actual, potential or assumed losses or profits or revenues, or for any collateral costs which may result from any loss or damage to materials. 5) All hazardous materials have been declared, and we abide by all Federal, Provincial, State and Local laws Client Signature Accepted by Mendelssohn Commerce I have read and agree to the Terms and Conditions of this Contract. Signature: Signature: Name: Name: Title: Title: Date: Date:

Agence des services frontaliers du Canada

CANADA CUSTOMS INVOICE FACTURE DES DOUANES CANADIENNES

PROTECTED PROTÉGÉ	В	when completed une fois rempli

					1 of de 1		
1. Vendor	(name and address) - Vendeur (nom et adresse)	2. Date of o	direct shipment to Canada - Da	ate d'expédition directe ve	•		
ABC Dis- 125 Elm	tributing Company			4/3/2007			
Chicago,			ferences (include purchaser's				
66666-6		10-9999	éférences (inclure le n° de con 999	nmande de l'acheteur)			
4. Consign	nee (name and address) - Destinataire (nom et adresse)		er's name and address (if othe adresse de l'acheteur (s'il diffè				
	tributing Company / Booth 234	No sale i		re du destinataire)			
	rional Computing Event	140 sale 1	nvoivea				
	rt Facility Where Street						
Toronto							
M7W 2P	6	-	Country of transhipment - Pays de transbordement				
		N/A	of origin of goods	IF SHIPMENT INCLUDES O	GOODS OF DIFFERENT ORIGINS		
		Pays d'o	rigine des marchandises rious - See Below	ENTER ORIGINS AGAINST SI L'EXPÉDITION COMPRI DIFFÉRENTES, PRÉCISEZ	I ITEMS IN 12. END DES MARCHANDISES D'ORIGINES LEUR PROVENANCE EN 12.		
	ortation: Give mode and place of direct shipment to Canada ort : Précisez mode et point d'expédition directe vers le Canada		ns of sale and terms of payme , consignment shipment, lease				
Mendels	sohn Commerce, Chicago, IL		ns de vente et modalités de pa ente, expédition en consignation		ises, etc.)		
Menders	Sonn commerce, chicago, 12	No sale i	nvolved				
		10. Currency	y of settlement - Devises du pa	niement			
		USD					
11. Number of	 Specification of commodities (kind of packages, marks and numbers, general description and characteristics, i.e., grade, quality) 		13. Quantity (state unit)		ice - Prix de vente		
packages Nombre	Désignation des articles (nature des colis, marques et numéros, description général et caractéristiques, p. ex. classe, qualité)	e	Quantité (précisez l'unité)	14. Unit price Prix unitaire	15. Total		
de colis			(1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-				
2 pcs	Wooden Crates - Display Booth (backwalls, lights, graphics, car	rpets) - USA	1	\$5,000.00	\$5,000.00		
2 pcs	Cartons - Advertising Brochures / Catalogs / Technical Literat	ure - USA	1000	\$0.10	\$100.00		
1 pc	Carton - Plastic Key Chains - CHINA		50	\$0.50	\$25.00		
1 pc	Carton - Books - USA		50	\$1.00	\$50.00		
3 pcs	Cases - Computers - CHINA		3	\$1,000.00	\$3,000.00		
2 pcs	Cases - Computer Monitors - JAPAN		2	\$500.00	\$1,000.00		
	fields 1 to 17 are included on an attached commercial invoice, check this box enseignement relativement aux zones 1 à 17 figure sur une ou des factures		16. Total weight - Poid	ds total	17. Invoice total Total de la facture		
commer	ciales ci-attachées, cochez cette case		Net	Gross - Brut			
	rcial Invoice No N° de la facture commerciale 's name and address (if other than vendor)	20 Originate	N/A or (name and address) - Expéd	300 lbs	\$9,175.00		
	adresse de l'exportateur (s'il diffère du vendeur)		, , ,	illedi d'origine (nom et ac	nesse)		
		125 Elm	tributing Company				
			IL 66666-6666				
21 Agency	ruling (if applicable) - Décision de l'Agence (s'il y a lieu)	22.					
Z1. Agonoy	tolling (in applicable) Decision of inspirate (only a lice)	If fields 2	23 to 25 are not applicable, che nes 23 à 25 sont sans objet, c		\boxtimes		
		field 17 indicate amoun lans le total à la zone 17		(if applicable): z (s'il y a lieu) :			
(i) <u></u>	Transportation charges, expenses and insurance (i) Transportation	n charges, expenses ar	nd insurance (i) Ro	valty payments or subseq	uent proceeds are		
l l	Les frais de transport, dépenses et assurances Les frais de transport, dépenses et assurances	of direct shipment to Car ransport, dépenses et a t d'expédition directe ve	ssurances Des	d or payable by the purch s redevances ou produits sés par l'acheteur	ont été ou seront		
]							
(ii) (Costs for construction, erection and assembly (ii) Amounts for neutred after importation into Canada	commissions other than	buying				
l l			rersées (ii) The	e ure aser has supplied us in he production of t	goods or services hese goods		
		· PL		ch teur fourni des marc vies pou la production d	chandises ou des		
(iii) Export packing (iii) Export packing		ng	marchandises				
(/ i	Le coût de l'emballage d'exportation Le coût de l'emballage d'exportation	emballage d'exportation					
	Dans ce formulaire, toutes les expressions désignar	nt des personnes visent	à la fois les hommes et les fe	mmes.			



CANADA CUSTOMS INVOICE FACTURE DES DOUANES CANADIENNES

COMMERC One Source. One Soluti		AILO OAI	NADIENNEO		Page of
2.1000.000.000.0000.0000.0000.0000.0000	(name and address) - Vendeur (nom et adresse)	2. Date of o	direct shipment to Canada - Da	ate d'expédition directe ve	de
			ferences (include purchaser's éférences (inclure le n° de con		
4. Consig	nee (name and address) - Destinataire (nom et adresse)		er's name and address (if othe adresse de l'acheteur (s'il diffè		
		6. Country	of transhipment - Pays de trar	nsbordement	
			of origin of goods	IF SHIPMENT INCLUDES G ENTER ORIGINS AGAINST SLIVEY OF THE AGAINST	DODS OF DIFFERENT ORIGINS ITEMS IN 12. ND DES MARCHANDISES D'ORIGINES LEUR PROVENANCE EN 12.
8 Transn	ortation: Give mode and place of direct shipment to Canada		ns of sale and terms of payme		ND DES MARCHANDISES D'ORIGINES LEUR PROVENANCE EN 12.
	ort : Précisez mode et point d'expédition directe vers le Canada	(i.e. sale Condition	, consignment shipment, lease ns de vente et modalités de pa ente, expédition en consignation	ed goods, etc.) aiement	ses, etc.)
		10. Currency	of settlement - Devises du pa	aiement	
11. Number of	Specification of commodities (kind of packages, marks and numbers, general description and characteristics, i.e., grade, quality)	<u> </u>	13. Quantity (state unit)	Selling price - Prix de vente	
packages Nombre de colis	Désignation des articles (nature des colls, marques et numéros, description générale et caractéristiques, p. ex. classe, qualité)		Quantité (précisez l'unité)	14. Unit price Prix unitaire	15. Total
	fields 1 to 17 are included on an attached commercial invoice, check this box		16. Total weight - Poic	ds total	17. Invoice total
Si tout i comme Comme	renseignement relativement aux zones 1 à 17 figure sur une ou des factures roiales ci-attachées, cochez cette case stroial Invoice No N° de la facture commerciale		Net	Gross - Brut	Total de la facture
	r's name and address (if other than vendor) adresse de l'exportateur (s'il diffère du vendeur)	20. Originato	r (name and address) - Expéc	diteur d'origine (nom et adi	esse)
21. Agency	ruling (if applicable) - Décision de l'Agence (s'il y a lieu)		3 to 25 are not applicable, chenes 23 à 25 sont sans objet, c		
23.	24.		25.		
	Dans ce formulaire, toutes les expressions désignant des p	ersonnes visent	à la fois les hommes et les fe	mmes.	