

# Inbound International Commercial Invoice



DATE: \_\_\_\_\_

WAYBILL/TRACKING #: \_\_\_\_\_

Sender: Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, Province, Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Phone: \_\_\_\_\_

Destination:  **Genova Diagnostics**  
*Please* 63 Zillicoa Street  
*Check One* Asheville, NC 28801-1074  
United States  
828-253-0621

**Genova Diagnostics**  
3425 Corporate Way  
Duluth, GA 30096  
United States  
828-253-0621

Country of origin	Description	UNITS	Unit Value (USD)	Total
_____	Biological Substances, Category B. UN3373 Class 6.2 PL 650	_____ (1 kit = 1 unit)	\$1.95 =	_____
<b>Harmonized Tariff Codes: (check any/all appropriate codes)</b>				
___	Urine, stool or saliva	#0511.99.4070		
___	Blood or serum	#3002.90.5110		
___	Breath	#9018.90.8000		
___	Dry Ice	#2811.21.0000	UN 1845	_____kg

**ALL ITEMS ARE NOT FOR RESALE / Value is for customs purposes only.**

**Enclosed specimens are of human origin only, not of tissue culture, and are for pathological analysis. They are preserved and are not known to contain infectious or hazardous pathogens.**

Signature: \_\_\_\_\_

Exit Point Copy       Entry Point Copy       Lab Copy