

Invoice **null**

**Issue Date:** 2025-01-16T17:32:07.142485

**Due Date:** 10/11/2025

**Billed To:**

Snook Point  
Hesse, Hesse  
Germany  
34379

**Mail Payment To:**

MyShipFlex Company Address

SHIP DATE	DESCRIPTION	SHIP TO	CARRIERS	TRACKING	PCS	WEIGHT	RATE	PRICE
2025-01-16T17:26:35.273982	null	Germany	DHL	null	null	100.0	\$200	706.65
2025-01-16T17:26:35.273982	null	Germany	DHL	null	null	100.0	\$200	706.65
2025-01-16T17:26:35.273982	null	Germany	DHL	null	null	100.0	\$200	706.65

**Total**

\$1000

**Payments**

\$1000

**Invoice Balance**

\$2000

All invoice inquiries must be reported within 10 days of the Invoice date. Please contact [billing@myshipflex.com](mailto:billing@myshipflex.com) or dial us at XXX-XXX-XXX