

COMMERCIAL INVOICE

Logistics & Inventory Manifest

Invoice #: _____

Date: _____

AWB/Tracking: _____

SHIPPER / EXPORTER

Company Name:

Address:

Tax ID/EORI:

Contact:

CONSIGNEE / IMPORTER

Company Name:

Address:

Tax ID/VAT:

Contact:

SHIPMENT DETAILS

Mode of Transport: _____

Incoterms 2020: _____

Port of Loading: _____

Port of Discharge: _____

INVENTORY SUMMARY

Total Packages: _____

Gross Weight: _____

Net Weight: _____

Currency: _____

SKU / Item #	Description of Goods	HS Code	Country of Origin	Qty	Unit Price	Total

Subtotal: _____

Freight/Insurance: _____

Total Declared Value: _____

Declaration: I declare that all the information contained in this invoice is true and correct and that the contents of this shipment are as stated above.

Authorized Signature & Stamp