COMMERCIAL INVOICE

Cold Chain Logistics Division

Invoice #: [000000]

Date: [YYYY-MM-DD]

SHIPPER / EXPORTER

[Company Name]
[Street Address]
[City, Country, Postal Code]
Tax ID: [Number]

CONSIGNEE / IMPORTER

[Company Name]
[Street Address]
[City, Country, Postal Code]
Tax ID: [Number]

SHIPPING DETAILS

AWB/Bill of Lading: [Number]
Port of Loading: [City]
Port of Discharge: [City]
Incoterms: [e.g. CIF, DAP]

PAYMENT TERMS

Currency: [USD/EUR]
Due Date: [YYYY-MM-DD]

TEMPERATURE REQUIREMENTS & MONITORING

Required Temp Range: [___]C to [___]C
Pre-Cooling Req: [Yes/No]
Data Logger ID: [Serial Number]
Coolant Type: [Dry Ice/Gel Pack/Active Unit]

Description of Goods	HS Code	Quantity	Unit Price	Total
[Product Name/Batch Number]	[0000.00]	[0] units	[0.00]	[0.00]
[Product Name/Batch Number]	[0000.00]	[0] units	[0.00]	[0.00]

Subtotal: [0.00]

Freight & Handling: [0.00]

Grand Total: [0.00]

DECLARATION

We hereby certify that this invoice shows the actual price of the goods described and that all particulars are true and correct. These commodities are temperature sensitive and must be handled according to the specifications listed above.

Authorized Signature: ______________________________