

SHORE EXCURSION INVOICE

[Operator Name]
[Address Line 1]
[Phone / Email]

Invoice #: [0000]
Date: [Date]
Cruise Ship: [Ship Name]

Bill To:
[Cruise Line/Agency Name]
[Contact Person]
[Address]

Tour Details:
Port of Call: [Port Name]
Tour Date: [Date]
Tour Code: [Code]

| Description of Service | Rate/Head | Qty (Pax) | Total |
|----------------------------|-----------|-----------|--------|
| [Standard Excursion Name] | \$0.00 | 0 | \$0.00 |
| [Private / VIP Upgrade] | \$0.00 | 0 | \$0.00 |
| [Transportation/Port Fees] | \$0.00 | 1 | \$0.00 |

Subtotal: \$0.00

Tax / VAT: \$0.00

Total Amount Due: \$0.00

Payment Instructions:

Bank Name: [Bank Name] | Account #: [Number] | SWIFT/BIC: [Code]

Please include Invoice Number as reference. Payment due within [X] days of port departure.