

SALES INVOICE

Invoice #: _____

Date: _____

Sender / Exporter

Company Name

Address Line 1

City, State, Zip

Country

VAT/Tax ID: _____

BILL TO (CONSIGNEE)

Name/Company:

Address:

City/State/Zip:

Country:

Phone:

SHIP TO (IF DIFFERENT)

Name/Company:

Address:

City/State/Zip:

Country:

Phone:

SHIPPING INFORMATION

Incoterms: _____

Carrier: _____

Tracking #: _____

Port of Export: _____

PAYMENT TERMS

Method: _____

Currency: _____

Due Date: _____

Description of Goods (HTS Code)	Qty	Unit Weight	Unit Price	Total

Description of Goods (HTS Code)	Qty	Unit Weight	Unit Price	Total

Subtotal: _____

Shipping: _____

Insurance: _____

Total Amount: _____

Declaration: We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

Authorized Signature: _____

Date: _____