

COMMERCIAL INVOICE

[Manufacturing Company Name]
[Street Address, City]
[Country, Zip Code]
VAT/Tax ID: [Number]

Invoice No: _____
Date: _____
Order No: _____

Consignee / Bill To:

Country: _____

Ship To (if different):

Destination Port: _____

Shipping Details:

Mode of Transport: _____

Incoterms: _____

Country of Origin: _____

Payment Terms:

Currency: _____

Payment Method: _____

Due Date: _____

Item / Part No.	HS Code	Description	Qty	Unit	Unit Price	Total
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Item / Part No.	HS Code	Description	Qty	Unit	Unit Price	Total

Subtotal: _____

Freight/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 & Company Stamp