

COMMERCIAL INVOICE

Invoice #: _____
Date: _____
PO #: _____

EXPORTER / SHIPPER

Tax ID/VAT: _____

Phone: _____

CONSIGNEE / SHIP TO

Country: _____

Phone: _____

SHIPPING INFORMATION

Carrier: _____

Tracking #: _____

Incoterms: _____

Reason for Export: _____

PAYMENT TERMS

Currency: _____

Method: _____

Country of Origin: _____

Description of Goods (including HS Code)	Qty	Unit	Weight	Unit Value	Total Value

Description of Goods (including HS Code)	Qty	Unit	Weight	Unit Value	Total Value

Subtotal: _____

Freight: _____

Insurance: _____

TOTAL: _____

I declare that all the information contained in this invoice is true and correct.

Authorized Signature: _____ Date: _____