COMMERCIAL INVOICE

Date: [Date]
Invoice #: [Invoice Number]

[Seller/Exporter Name]
[Address Line 1]
[City, State, Zip, Country]
[Tax ID / VAT Number]

CONSIGNEE (BILL TO)

[Buyer Name]
[Address Line 1]
[City, State, Zip, Country]
[Contact Phone/Email]

BUYER (IF OTHER THAN CONSIGNEE)

[Name/Company]
[Address Line 1]
[City, State, Zip, Country]

SHIPPING INFORMATION

Method: [Air/Sea/Road]
Vessel/Flight: [No.]
Port of Loading: [City, Country]
Port of Discharge: [City, Country]

TERMS & REFERENCES

Incoterms: [e.g. FOB, CIF, DAP]
Currency: [e.g. USD, EUR]
Payment Terms: [e.g. Net 30, LC]
PO Number: [Reference]

Description of Goods (inc. HS Code)	Qty	Unit	Unit Price	Total
[Detailed Description] HS Code: [0000.00]	[0]	[Pcs/Kg]	[0.00]	[0.00]

Description of Goods (inc. HS Code)	Qty	Unit	Unit Price	Total

Subtotal: [0.00]
Shipping/Freight: [0.00]
Insurance: [0.00]

Total Value: [0.00]

Package Details:
Total Weight (Gross/Net): [00kg / 00kg]
Total Packages: [Number & Type]
Country of Origin: [Country]
Reason for Export: [e.g. Sale]

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

Authorized Signature