

INVOICE

Company Name / Logo

Invoice #: _____

Date: _____

BILL TO:

SHIPPER / CARRIER:

VESSEL/VOYAGE:

PORT OF LOADING:

PORT OF DISCHARGE:

CONTAINER NO:

B/L NUMBER:

ETD/ETA:

Description of Charges	Qty/Unit	Rate	Total
Ocean Freight			
Terminal Handling Charges (THC)			
Bunker Adjustment Factor (BAF)			
Documentation Fee			
Subtotal: \$0.00			
Tax/VAT: \$0.00			
Total Amount: \$0.00			

Payment Terms & Instructions:

Bank: _____ | SWIFT: _____ | Account: _____

Notes: Goods subject to standard maritime trading conditions.