

PURCHASE INVOICE

Vendor: [Forwarder Name]
[Address]
[Tax ID]

Invoice #: [000000]
Date: [YYYY-MM-DD]
Due Date: [YYYY-MM-DD]

Bill To:
[Company Name]
[Address]
[Contact Person]

MAWB/MBL: [Number]
HAWB/HBL: [Number]
Origin: [Port/City]
Destination: [Port/City]
Vessel/Flight: [Name/No.]
ETD/ETA: [Date]
Weight/Vol: [KGS / CBM]
Container #: [Number]

Description of Charges	Qty/Unit	Rate	Amount
Ocean/Air Freight			
Fuel Surcharge			
Handling Fee			
Customs Clearance			
Local Trucking			

Subtotal: 0.00
Tax/VAT: 0.00

Total Amount: [Currency] 0.00

Payment Terms: [Net 30 / COD]

Bank Details: [Bank Name] | **SWIFT:** [Code] | **Account:** [Number]