

INVOICE

[Forwarder/Carrier Name]

[Address Line 1]

[City, Country, Zip]

Invoice #: [000000]

Date: [YYYY-MM-DD]

Due Date: [YYYY-MM-DD]

BILL TO:

[Customer Name]

[Customer Address]

[VAT/Tax ID]

SHIPPER / EXPORTER:

[Shipper Name]

[Origin Address]

HBL/MBL #: [Number]

Vessel/Voyage: [Name/No.]

Port of Loading: [City/Code]

Container #: [Number]

Weight/Volume: [KG / CBM]

Port of Discharge: [City/Code]

Description of Charges	Qty/Unit	Rate	Amount
Ocean Freight (Prepaid/Collect)	[0]	[0.00]	[0.00]
Bunker Adjustment Factor (BAF)	[0]	[0.00]	[0.00]
Terminal Handling Charges (THC)	[0]	[0.00]	[0.00]

Description of Charges	Qty/Unit	Rate	Amount
Documentation Fee	[0]	[0.00]	[0.00]
Customs Clearance	[0]	[0.00]	[0.00]
Subtotal: [0.00]			
Tax/VAT: [0.00]			
<hr/>			
Total ([Currency]): [0.00]			

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

Notes: All business is transacted subject to standard trading conditions.