

COMMERCIAL INVOICE

Invoice #: _____

Date: _____

[CORPORATE ENTITY NAME]

[Tax ID / VAT Number]

[Street Address]

[City, State, Zip, Country]

BILL TO

[Client Name]

[Client Address]

[Country]

[Contact Phone]

SHIP TO / CONSIGNEE

[Recipient Name]

[Shipping Address]

[Country]

[Export License #]

Incoterms: _____

Currency: _____

Payment Terms: _____

Description of Goods	HS Code	Qty	Unit Price	Total

Subtotal: 0.00

Shipping: 0.00

Insurance: 0.00

Total Value: 0.00

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

Country of Origin: _____

Bank Details: SWIFT/BIC: _____ | IBAN: _____

Authorized Signature: _____