

PURCHASE ORDER / INVOICE

Company Name
Street Address
City, Country, Zip
Tax ID: _____

No: _____
Date: _____
Currency: _____
Incoterms: _____

EXPORTER / SELLER

Name: _____
Address: _____
Country: _____
Contact: _____

IMPORTER / BUYER

Name: _____
Address: _____
Country: _____
Contact: _____

SHIPPING INFORMATION

Mode: [Sea/Air/Road]
Port of Loading: _____
Port of Discharge: _____
ETD: _____

PAYMENT TERMS

Method: [Wire/LC/Net]
Bank: _____
SWIFT/BIC: _____
IBAN: _____

HS Code	Description of Goods	Qty	Unit	Price	Total

Subtotal: _____

Shipping/Freight: _____

Insurance: _____

Total Amount: _____

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

Authorized Signature: _____

Company Stamp: _____