

COMMERCIAL INVOICE

Date: [Date]
Invoice #: [Number]

[Company Name]
[Street Address]
[City, State, Zip]
[Tax ID/VAT Number]

EXPORTER / SHIPPER

[Contact Name]
[Company Name]
[Address]
[Phone/Email]

CONSIGNEE / SHIP TO

[Contact Name]
[Company Name]
[Address]
[Phone/Email]

SHIPPING INFORMATION

Mode of Transport: [Air/Sea/Road]
Carrier: [Carrier Name]
Waybill/Tracking: [Number]

TRANSACTION TERMS

Incoterms: [e.g. DAP, EXW, FOB]
Reason for Export: [e.g. Sale, Repair]
Currency: [USD/EUR/GBP]

DESCRIPTION OF GOODS	HS CODE	ORIGIN	QTY	UNIT VALUE	TOTAL VALUE
[Product Description]	[HS Code]	[ISO Country]	[Qty]	[Price]	[Subtotal]

DESCRIPTION OF GOODS	HS CODE	ORIGIN	QTY	UNIT VALUE	TOTAL VALUE

Subtotal: [0.00]

Freight: [0.00]

Insurance: [0.00]

Total Value: [0.00]

I declare that all the information contained in this invoice is true and correct and that the contents of this shipment are as stated above.

Authorized Signature: _____ Date: _____

Weight: Net [0.00] kg / Gross [0.00] kg | Total Packages: [0]