INVOICE

[Company Name]
[Address Line 1]
[Address Line 2]

Invoice #: ___________
Date: ___________
Due Date: ___________

BILL TO

[Client Name]
[Client Address]
[Contact Number]

SHIPMENT DETAILS

B/L Number: ___________
Vessel/Voyage: ___________
Container #: ___________
Port of Loading: ___________

Description of Documentation Fees	Qty	Rate	Amount
Bill of Lading Issuance Fee			
Manifest Documentation Fee			
Electronic Data Interchange (EDI) Transmission			
Courier & Postage Charges			
Amendment Fee (if applicable)			

Subtotal: 0.00
Tax / VAT: 0.00
Total Due (USD): $0.00

PAYMENT INSTRUCTIONS

Bank Name: ___________ | Account Name: ___________
SWIFT/BIC: ___________ | IBAN: ___________