

COMMERCIAL INVOICE

INVOICE #: _____

DATE: _____

[SUPPLIER NAME]

[Business Address]

[Tax ID / VAT Number]

[Phone / Email]

EXPORTER / SHIPPER:

CONSIGNEE / IMPORTER:

COUNTRY OF ORIGIN: _____

PORT OF LOADING: _____

INCOTERMS: _____

CURRENCY: _____

PAYMENT TERMS: _____

AIR WAYBILL / BILL OF LADING: _____

Description of Goods (HS Code)	Dimensions	Quantity	Unit Price	Total
Silicon Carbide Skateboard Grip Tape (HS: 6805.20)	_____	_____	_____	_____
Perforated Anti-Bubble Grip Sheets (HS: 6805.20)	_____	_____	_____	_____
Custom Graphic Printed Grip Roll (HS: 6805.20)	_____	_____	_____	_____

Subtotal: _____

Shipping/Freight: _____

Insurance: _____

TOTAL VALUE: _____

PACKAGE DETAILS:

Total Cartons: _____

Gross Weight: _____ kg

Net Weight: _____ kg

DECLARATION:

We hereby certify that this invoice shows the actual price of the goods described and that all particulars are true and correct.

Authorized Signature: _____

Notes: Goods are for skateboard application only. Store in a cool, dry place to maintain adhesive integrity.