

COMMERCIAL INVOICE

Invoice #: _____

Date: _____

[Exporter Company Name]

[Street Address]

[City, State, Zip, Country]

Tax ID / VAT: _____

CONSIGNEE (BILL TO)

[Name/Company]

[Address]

[Country]

[Phone/Email]

SHIPPING DETAILS

Method: _____

Port of Loading: _____

Port of Discharge: _____

Incoterms: _____

Description of Goods	HS Code	Qty	Unit Price	Total

Subtotal: _____

Shipping: _____

Insurance: _____

Total (USD): _____

PACKING INFO

Total Packages: _____

Gross Weight: _____

Net Weight: _____

PAYMENT INSTRUCTIONS

Bank Name: _____

SWIFT/BIC: _____

Account #: _____

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

Authorized Signature