

COMMERCIAL INVOICE

INVOICE #: _____
DATE: _____

EXPORTER (SHIPPER):

Tax ID/VAT: _____

IMPORTER (CONSIGNEE):

Tax ID/EIN: _____

PORT OF ENTRY:

COUNTRY OF ORIGIN:

INCOTERMS:

VESSEL/FLIGHT NO:

BILL OF LADING/AWB:

CURRENCY:

Marks & Nos.	HS Code	Description of Goods	Qty	Unit Price	Total
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Subtotal:	_____
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Freight:	_____
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Insurance:	_____
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Total Value:	_____
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DECLARATION: I declare that the information above is true and correct to the best of my knowledge.

AUTHORIZED SIGNATURE: _____ **TITLE:**
