COMMERCIAL INVOICE

Invoice #: [Invoice Number]
Date: [Date of Issue]
PO #: [Purchase Order Number]

EXPORTER / SHIPPER

[Company Name]
[Address Line 1]
[City, State, Zip]
[Country]
[Contact Name]
[Phone / Email]
[Tax ID / EORI Number]

CONSIGNEE / IMPORTER

[Recipient Name/Company]
[Address Line 1]
[City, State, Zip]
[Country]
[Contact Name]
[Phone / Email]
[Tax ID / VAT Number]

SHIPPING INFORMATION

Carrier: [Carrier Name]
Waybill #: [Tracking Number]
Port of Loading: [City, Country]
Port of Discharge: [City, Country]
Final Destination: [Country]

TERMS OF TRADE

Incoterms: [e.g., FOB, CIF, DAP]
Reason for Export: [e.g., Sale, Sample, Repair]
Currency: [e.g., USD, EUR]
Payment Terms: [e.g., Net 30]

Description of Goods	HS Code	Country of Origin	Qty	Unit	Unit Value	Total Value
[Full description of item]	[Harmonized Code]	[ISO Country]	[0]	[pcs/kg]	[0.00]	[0.00]
[Full description of item]	[Harmonized Code]	[ISO Country]	[0]	[pcs/kg]	[0.00]	[0.00]

Subtotal: [0.00]
Shipping/Freight: [0.00]
Insurance: [0.00]

Total Declared Value: [0.00]
Total Packages: [Count]
Total Gross Weight: [0.00 kg]
Total Net Weight: [0.00 kg]

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

Authorized Signature & Date