COMMERCIAL INVOICE

[Exporter Name]
[Address Line 1]
[City, Country, Zip]
VAT/Tax ID: [Number]

Invoice #: [000000]
Date: [YYYY-MM-DD]
P.O. Number: [Reference]

EXPORTER / SHIPPER

[Full Name/Company]
[Street Address]
[Contact Person]
[Phone Number]

CONSIGNEE / IMPORTER

[Full Name/Company]
[Street Address]
[Contact Person]
[Phone Number]

SHIPPING INFORMATION

Incoterms:
[e.g. FOB, CIF]
Port of Loading:
[City/Country]
Port of Discharge:
[City/Country]
Mode of Transport:
[Sea/Air/Road]
Vessel/Flight No:
[Details]
Currency:
[USD/EUR/etc]

HS Code	Description of Goods	Qty	Unit Weight	Unit Price	Total
[0000.00]	[Product Description 1]	[0]	[0 kg]	[0.00]	[0.00]
[0000.00]	[Product Description 2]	[0]	[0 kg]	[0.00]	[0.00]

Subtotal: [0.00]
Freight Charges: [0.00]
Insurance: [0.00]
Total Amount: [0.00]

PACKAGE DETAILS

Total Net Weight: [0.00 kg]
Total Gross Weight: [0.00 kg]
Total Packages: [0 Units]

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: _____

Country of Origin: [Country Name]