

# LOGISTICS SOLUTIONS CO.

123 Shipping Lane, Port City  
Tax ID: 00-0000000

## INVOICE

Invoice #: \_\_\_\_\_  
Date: \_\_\_\_\_

### SHIPPER / EXPORTER

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### CONSIGNEE

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Vessel/Voyage:**  
\_\_\_\_\_

**Port of Loading:**  
\_\_\_\_\_

**Port of Discharge:**  
\_\_\_\_\_

**Container No:**  
\_\_\_\_\_

**Seal No:**  
\_\_\_\_\_

**Container Size:**

20ft / 40ft FCL

**B/L Number:**  
\_\_\_\_\_

**ETD:**  
\_\_\_\_\_

**ETA:**  
\_\_\_\_\_

Description of Charges	Qty/Units	Rate	Amount
Ocean Freight (FCL)			
Bunker Adjustment Factor (BAF)			
Terminal Handling Charges (THC)			
Documentation Fee			
Customs Clearance			

Subtotal: \$ 0.00  
Tax/VAT: \$ 0.00  
Total Due: \$ 0.00

**PAYMENT INSTRUCTIONS**

Bank Name: \_\_\_\_\_ | SWIFT: \_\_\_\_\_ | Account No: \_\_\_\_\_

Terms: Net 30 Days. Subject to standard trading conditions.