

INVOICE

Border Clearance & Customs Brokerage

Invoice #: _____

Date: _____

Importer/Consignee:

Shipment Information:

Entry Number: _____

Bill of Lading: _____

Port of Entry: _____

Description of Goods / Service	HS Code	Value	Duty %	Total
Customs Clearance Fee				
Regulatory Agency Inspection Fee				
Warehouse/Storage Charges				

Subtotal: \$ _____

Total Duties & Taxes: \$ _____

TOTAL AMOUNT DUE: \$_____

Payment Terms:

Due upon receipt. Please include the Invoice Number with your remittance.

Notes:
