

# COMMERCIAL INVOICE

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

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## EXPORTER (Shipper):

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Country: \_\_\_\_\_  
Tax ID/VAT: \_\_\_\_\_

## IMPORTER (Consignee):

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Country: \_\_\_\_\_  
Tax ID/VAT: \_\_\_\_\_

Description of Goods	HS Code	Qty	Unit Price	Total

## INCOTERMS 2020 SPECIFICATION:

Rule: [ e.g. CIF / FOB / DAP ]

Named Place/Port: \_\_\_\_\_

Currency: \_\_\_\_\_

Subtotal: \_\_\_\_\_

Freight: \_\_\_\_\_

Insurance: \_\_\_\_\_

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**Total Value:** \_\_\_\_\_

**Shipping Details:**

Country of Origin: \_\_\_\_\_

Total Packages: \_\_\_\_\_

Gross Weight: \_\_\_\_\_

Net Weight: \_\_\_\_\_

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I declare that the information mentioned above is true and correct to the best of my knowledge.

Authorized Signature: \_\_\_\_\_