

COMMERCIAL INVOICE

Invoice No: _____
Date: _____

EXPORTER / SHIPPER

Country: _____
Contact: _____

CONSIGNEE / IMPORTER

Country: _____
Tax ID/VAT: _____

TRANSPORT DETAILS Mode of Transport: _____
Port of Loading: _____
Port of Discharge: _____
Vessel/Flight No: _____

PAYMENT & DELIVERY TERMS Incoterms 2020: _____
Currency: _____
Payment Terms: _____
Reason for Export: _____

Marks & Nos.	Description of Goods (HS Code)	Qty	Unit	Unit Price	Total Value

PACKAGE INFORMATION Total Packages: _____

Gross Weight: _____

Net Weight: _____

Subtotal: _____

Freight: _____

Insurance: _____

Total Invoice Value: _____

Declaration: We certify that this invoice is true and correct and that the contents of this shipment are as stated above.

Authorized Signature & Stamp

Date