COMMERCIAL INVOICE

INVOICE NO:
[ ]
DATE:
[ ]

EXPORTER / VENDOR:

[Company Name]
[Street Address]
[City, Country]
[Tax ID/VAT No]

IMPORTER / CONSIGNEE:

[Company Name]
[Street Address]
[City, Country]
[Tax ID/VAT No]

SHIPPING DETAILS:

Port of Loading: [ ]
Port of Discharge: [ ]
Vessel/Flight No: [ ]

PAYMENT TERMS:

Incoterms: [e.g. FOB/CIF]
Currency: [ ]
Payment Method: [ ]

Description of Goods	HS Code	Qty	Unit Price	Total
[Product Description]	[Code]	[0]	[0.00]	[0.00]

Subtotal: [0.00]
Freight/Ins: [0.00]
TOTAL: [0.00]

DECLARATION:

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

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Authorized Signature