

[FORWARDER NAME]

[Street Address]
[City, State, Zip]
[VAT/Tax ID]

IMPORT INVOICE

Invoice No: _____
Date: _____

CONSIGNEE (BILL TO)

[Company Name]
[Address]
[Contact Person]
[Tax ID]

SHIPPER (EXPORTER)

[Company Name]
[Address]
[Country of Origin]

Vessel / Voyage _____
Port of Loading _____
Port of Discharge _____
ETA Date _____
HBL / MBL No. _____
Container No. _____
Weight / Volume _____
Incoterms _____

Description of Charges	Currency	Rate / Unit	Quantity	Amount
Ocean Freight (Prepaid/Collect)				
Terminal Handling Charges (THC)				
Customs Clearance Fee				
Port Security & Documentation				
Delivery Order Fee				

Description of Charges	Currency	Rate / Unit	Quantity	Amount
Inland Haulage / Trucking				

Subtotal: 0.00

Tax / VAT: 0.00

Total Amount Due: [CUR] 0.00

BANK WIRE INSTRUCTIONS

Bank Name: [Name] | SWIFT: [Code] | IBAN: [Number]

Subject to the standard trading conditions of the Maritime Freight Forwarders Association.