

COMMERCIAL INVOICE

[Company Name]

[Address Line 1]

[City, State, Zip, Country]

Invoice No: _____

Date: _____

Reference: _____

SHIPPER / EXPORTER

[Name/Address]

CONSIGNEE / IMPORTER OF RECORD

[Name/Address]

VESSEL / VOYAGE

PORT OF LOADING

PORT OF DISCHARGE

BILL OF LADING #

HS Code	Description of Goods (inc. Marks & Nos)	Quantity	Unit Weight	Unit Price	Total Value

Total Net Weight: _____ kg

Total Gross Weight: _____ kg

Currency: _____

Total Invoice Value: _____

INCOTERMS & TERMS OF PAYMENT

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

Authorized Signature

Date