COMMERCIAL INVOICE

Logistics & Machinery Import Services

Invoice #: _____

Date: _____

H.S. Code: _____

EXPORTER / CONSIGNOR

Name: _____

Address: _____

Country: _____

Tax ID/VAT: _____

IMPORTER / CONSIGNEE

Name: _____

Address: _____

Country: _____

License #: _____

SHIPPING DETAILS

Port of Loading: _____

Port of Discharge: _____

Vessel/Flight No: _____

Bill of Lading: _____

LOGISTICS TERMS

Incoterms: _____

Currency: _____

Payment Terms: _____

Total Weight: _____

Machinery Description (Make, Model, Serial #)	Quantity	Unit Weight	Unit Price	Total

Subtotal: _____
Freight Charges: _____
Insurance: _____
Import Duties/Taxes: _____
TOTAL AMOUNT DUE: _____

Declaration: We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

Authorized Signature: _____ **Date:** _____