

INVENTORY IMPORT INVOICE

Reference No: _____

Date: _____

Logistics Provider Name

Street Address

City, Country, Postcode

Contact: +00 000 000 000

IMPORTER / CONSIGNEE

Company Name

Address Line 1

Address Line 2

Tax/VAT ID: _____

SHIPMENT DETAILS

Origin: _____

Carrier/AWB: _____

Entry Type: _____

Warehouse Code: _____

SKU / Item ID	Description	Qty	Unit Value	Duty/Tax %	Total (USD)

Subtotal: \$0.00

Import Duties: \$0.00

Handling Fees: \$0.00

TOTAL DUE: \$0.00

Notes: All inventory listed above is subject to customs inspection. Storage fees may apply if clearance is delayed beyond 48 hours.

Payment Terms: Net 30 days. Please include Reference No. on all wire transfers.