

COMMERCIAL INVOICE

Invoice #: [00000]
Date: [YYYY-MM-DD]
PO #: [00000]

EXPORTER / SHIPPER

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

IMPORTER / CONSIGNEE

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

SHIPPING INFORMATION

Country of Origin: [Country]
Port of Loading: [Port Name]
Vessel/Flight No: [Number]

TERMS & DELIVERY

Incoterms: [e.g., CIF, FOB, DAP]
Currency: [e.g., USD, EUR]
Payment Terms: [Net 30/LC]

HS Code	Description of Goods	Qty	Unit	Unit Price	Total
[0000.00]	[Part Name / Technical Specifications]	[0]	[pcs]	[0.00]	[0.00]
[0000.00]	[Part Name / Technical Specifications]	[0]	[pcs]	[0.00]	[0.00]

Subtotal: 0.00
Freight Charges: 0.00
Insurance: 0.00

Total Invoice Value: [CUR] 0.00

DECLARATION

We hereby certify that this invoice is true and correct and that the contents of this shipment are as stated above. All goods are of [Origin Country] origin.

Authorized Signature: _____

Date: _____