

INVOICE

[Company Name]
[Address Line 1]
[Tax ID / VAT Number]

Invoice #: _____
Date: _____
Due Date: _____

Consignee / Bill To:

[Name]
[Address]
[Contact Number]

Shipment Details:

MAWB: _____
HAWB: _____
Origin: _____
Weight (kg): _____

Description of Handling Charges	Qty/Weight	Rate	Amount
Terminal Handling Fee			
Breakbulk / Document Fee			
Customs Clearance Handling			
Warehouse Storage			
Delivery Order Fee			

Subtotal: \$ 0.00
Tax/VAT: \$ 0.00
Total Amount: \$ 0.00

Payment Instructions:

Bank Name: [Bank Name]
SWIFT/BIC: [Code]
Account Number: [Number]

Terms: Net 30. All cargo handled subject to standard trading conditions.