

# Commercial Invoice

**This invoice must be completed in English.**

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|   |              |   |                    |  |                    |                                    |                         |            |             |
|---|--------------|---|--------------------|--|--------------------|------------------------------------|-------------------------|------------|-------------|
| Ship Date:<br>06 Aug, 2021  |              | Air Waybill No. / Tracking No.:<br>000000000000 |                    | Payment Terms:   |                    | Bill of Lading:                    |                         |            |             |
| Invoice No.:  |              | Purchase Order No.:                             |                    | Purpose of Shipment:<br>Commercial   |                    |                                    |                         |            |             |
| <b>EXPORTER:</b><br><br>Tax ID#:<br><br>Contact Name: test<br>Telephone No. : 01234567098<br>E-Mail: rajeesh.hit@gmail.com<br>Company Name/Address:<br>hit<br>xyz<br><br>Harrison AR 72601<br>Country: UNITED STATES OF AMERICA<br>Parties to Transaction:<br><input type="checkbox"/> Related <input type="checkbox"/> Non-Related |              |   |                    | <b>IMPORTER:</b><br><br><br><br>Tax ID:<br><br>Company Name/Address:<br><br><br><br>Country: |                    |                                    |                         |            |             |
| <b>CONSIGNEE:</b><br><br>Tax ID#:<br><br>Contact Name: Test test<br>Telephone No. : 01234567098<br>E-Mail: rajeesh.hit@gmail.com<br>Company Name/Address:<br>hit<br>xyz<br>**TEST LABEL - DO NOT SHIP**<br><br>harrison AR 72601<br>Country: UNITED STATES OF AMERICA   |              |   |                    | <b>SOLD TO:</b><br><br><br><br>Tax ID#:<br><br>Company Name/Address:<br><br><br><br>Country: |                    |                                    |                         |            |             |
| If there is a designated broker for this shipment, please provide contact information   |              |   |                    |  |                    |                                    |                         |            |             |
| Name of Broker  |              | Tel. No   |                    | Contact Name   |                    |                                    |                         |            |             |
| Duties and Taxes Payable by   |              |   |                    | <input type="checkbox"/> Exporter  |                    | <input type="checkbox"/> Consignee |                         |            |             |
| If Other, please specify  |              |   |                    | <input type="checkbox"/> Other   |                    |                                    |                         |            |             |
| No. of Packages   | No. of Units | Net Weight (LBS / KGS)                          | Unit of Measure    | Description of Goods   |                    | Harmonized Tariff Number           | Country of Manufacturer | Unit Value | Total Value |
|   |              |   |                    |  |                    |                                    |                         |            |             |
| Total Pkgs  | Total Units  | Total Net Weight                                | (Indicate LBS/KGS) | Total Gross Weight   | (Indicate LBS/KGS) | Terms of Sale:                     |                         | Subtotal   | 0.00        |
| 1   |              |   |                    | 79.38 LB   |                    |                                    |                         | Insurance  | 0.00        |
| Special Instructions  |              |   |                    |  |                    |                                    | Freight                 | 0.00       |             |
|   |              |   |                    |  |                    |                                    | Packing                 | 0.00       |             |
|   |              |   |                    |  |                    |                                    | Handling                | 0.00       |             |
|   |              |   |                    |  |                    |                                    | Other                   | 0.00       |             |
| Declaration Statement(s)  |              |   |                    |  |                    |                                    | Invoice Total           | 0.00       |             |
| I declare that all the information contained in this invoice to be true and correct   |              |   |                    |  |                    |                                    | Currency Code           |            |             |
| Originator or Name of Company Representative if the invoice is being completed on behalf of a company or individual   |              |   |                    |  |                    |                                    |                         |            |             |
| test  |              |   |                    |  |                    |                                    |                         |            |             |
| Signature / Title / Date  |              |   |                    |  |                    |                                    |                         |            |             |

06 Aug, 2021