

EXPORTER: Tax ID#: Contact Name: Telephone No.: E-Mail: Company Name/Address: Country/Territory: Parties to Transaction: <input type="checkbox"/> Related <input type="checkbox"/> Non-Related	Ship Date: Air Waybill No. / Tracking No.: Invoice No.: Purchase Order No.: Payment Terms: Bill of Lading: Purpose of Shipment:
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If there is a designated broker for this shipment, please provide contact information.

Name of Broker	Tel. No.	Contact Name

No. of Packages	No. of Units	Net Weight (LBS / KGS)	Unit of Measure	Description of Goods	Harmonized Tariff Number	Country of Manufacture	Unit Value	Total Value
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Total Pkgs	Total Units	Total Net Weight	(Indicate LBS/KGS)	Total Gross Weight	(Indicate LBS/KGS)	Terms of Sale:	Subtotal:	
							Insurance:	

Declaration Statement(s):	Handling:	
	Other:	

I declare that all the information contained in this invoice to be true and correct.	Invoice Total:	
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Originator or Name of Company Representative if the invoice is being completed on behalf of a company or individual:	Currency Code:	
Signature / Title / Date:		

This invoice must be completed in English.

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