

This invoice must be completed in English.

COMMERCIAL INVOICE

Page _____ of _____

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:								
CONSIGNEE: Tax ID#: Contact Name: Telephone No.: E-Mail: Company Name/Address: Country/Territory:					SOLD TO (if different from Consignee): <input type="checkbox"/> Same as CONSIGNEE: Tax ID#: Company Name/Address: Country/Territory:								
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 <input type="checkbox"/> Other If Other, please specify _____													
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			
Total Pkgs	Total Units	Total Net Weight (Indicate LBS/KGS)	Total Gross Weight (Indicate LBS/KGS)	Terms of Sale:			Subtotal:						
Special Instructions:										Freight:			
										Packing:			
Declaration Statement(s):										Handling:			
										Other:			
I declare that all the information contained in this invoice to be true and correct.										Invoice Total:			
Originator or Name of Company Representative if the invoice is being completed on behalf of a company or individual:										Currency Code:			
Signature / Title / Date:													

**COMMERCIAL INVOICE
CONTINUATION SHEET**

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EXPORTER:					Air Waybill No. / Tracking No.: Invoice No.: Purchase Order No.: Payment Terms: Bill of Lading:			
Country/Territory:								
CONSIGNEE:					SOLD TO (if different from Consignee): Country/Territory:			
Country/Territory:								
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
SUBTOTAL FOR THIS PAGE: _____								