## **COMMERCIAL INVOICE**

This invoice must be completed in English.

EXPORTER:								Ship Date:	Ship Date:				
Tax ID#:								Air Waybill N	Air Waybill No. / Tracking No.:				
Contact Name: Telephone No.:								Air waybiii r	Air Waydii No. / Tracking No.:				
E-Mail:								Invoice No.:		Puro	hase Order No.:		
Company Name/Address:								Payment Ter	Payment Terms: Bill of Lading:				
								D	Dames of Oklamati				
								Purpose of S	Purpose of Shipment:				
Country/Territory: Parties to Transaction:													
Related Non-Related													
CONSIGNEE:								SOLD TO (if different from Consignee):					
Tax ID#:								Same as CONSIGNEE:					
Contact Name:													
Telephone No.: E-Mail:								Tax ID#:	Tax ID#:				
Company Name/Address:								Company Name/Address:					
Country/Territory:								Country/Ter	Country/Territory:				
If there is a designated broker for this shipment, please provide contact information.									Contact Name				
								please specify		ict Name			
No. of	No. of	Net Weight	Unit of			tion of G		<u> </u>	Harmonized	Country of	Unit	Total	
Packages	Units	(LBS / KGS)	Measure		Descrip	illoii oi G	oous (	<del>_</del>	Tariff Number	Manufacture	Value	Value	
Total	Total	Total Net	(Indicate	Total Gross	(Indicate	Terms					Outratal		
Pkgs	Units	Weight	LBS/KGS)	Weight	LBS/KGS)	of Sale:					Subtotal:		
											Insurance:		
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									y or individual:		Currency Code:		
Signature	/ Title / Date	<b>9</b> :											

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of .

## **COMMERCIAL INVOICE**

**CONTINUATION SHEET** This invoice must be completed in English. Page \_\_\_\_ \_ of \_\_\_\_ EXPORTER: Air Waybill No. / Tracking No.: Invoice No.: Purchase Order No.: Payment Terms: Bill of Lading: Country/Territory: SOLD TO (if different from Consignee): CONSIGNEE: Country/Territory: Country/Territory: Net Weight (LBS / KGS) Harmonized Tariff Number Country of Manufacture No. of No. of Units Unit of Unit Total **Description of Goods** Packages | Measure Value Value

SUBTOTAL FOR THIS PAGE: