

# COMMERCIAL INVOICE

This invoice must be completed in English.

Page \_\_\_\_\_ of \_\_\_\_\_

<b>EXPORTER:</b> Tax ID#: _____ Contact Name: _____ Telephone No.: _____ E-Mail: _____ Company Name/Address: _____  Country: _____ 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: _____
---	---

<b>CONSIGNEE:</b> Tax ID#: _____ Contact Name: _____ Telephone No.: _____ E-Mail: _____ Company Name/Address: _____  Country: _____	SOLD TO (if different from Consignee): <input type="checkbox"/> Same as CONSIGNEE:  Tax ID#: _____  Company Name/Address: _____  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  Exporter  Consignee  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 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:	
							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 of a company or individual:	Currency Code:	

Yvonne Doyle / Customer Service Lead 05/04/26 *Yvonne Doyle*

Signature / Title / Date: \_\_\_\_\_