

Commercial Invoice

Date		Invoice #				
Shipper Name		Consignee Name				
Contact Person		Contact Person				
Street Address		Street Address				
City	Postal Code	City	Postal Code			
Country	Email Address	Country	Email Address			
Telephone Number	Fax Number	Telephone Number	Fax Number			
Tax ID Number (EIN)	Exporting Carrier:	Tax ID Number (i.e. EIN,VAT)	Incoterms			
Other Information. (i.e. ITN #)	Total # of Pieces	Total GW in Kilos	AWB #			
Complete Commodity Description		HTS, Schedule B	Country of Manufacture	Quantity, Unit of Measure	Unit Price USD \$	Total Price USD \$
<p>I/we hereby certify that the information on this invoice is true and correct and that the contents of this shipment are as stated above.</p>		Subtotal (USD \$)				
		Freight Cost				
		Insurance Cost				
		Total Invoice Value (USD \$)				
Signature and Title of Authorized Person	Date					