Your corporation Name

Street Address

COMMERCIAL INVOICE

DATE _____ INVOICE# _____

City. ST ZIP Code Phone Number, Web Address, etc. Country Contact Person SOLD TO Tax ID NameName				SHIP TO Tax ID	P.O. NUMBER TERMS OF SALE REASON OF EXPORT		
AdressAddress City, State ZIPCity, State ZIP CountryCountry PhonePhone				- - -			
Currency Code	Sales Person Ship Date		Ship Date	Ship Via	Total Packages		Total Weight
Units	U/M	Descr	iption	Harm.code	C/O	Unit Price	Line Total
Declaration line 1 Declaration line 2 TAX 8.000% DISCOUNT/REBATE COMMENTS SHIPPING & HANDLING INSURANCE							
						OTHER GRAND TOTAL	

I declare all the information contained in this invoice to be true and correct Signature of shipper/exporter

SHIPPER

DATE