

# COMMERCIAL INVOICE

DATE OF EXPORTATION		EXPORT REFERENCE				
SHIPPER/ EXPORTER (Complete Name & Address)  TEL. NO.		CONSIGNEE (Complete name & Address)				
		TEL NO.: SSN/EIN NO. : IMPORTER IF OTHER THAN CONSIGNEE				
COUNTRY OF EXPORT		B/L /AWB No.				
COUNTRY OF ORIGIN OG GOODS						
Country of Ultimate Destination						
Mark/No	No. of Packages	Complete Description of Goods	QTY	Unit Value	Total Value	Currency
	Total No of Pkgs.				Total Value	Currency
I DECLARE ALL THE INFORMATION CONTAINED IN THIS INVOICE TO BE TRUE AND CORRECT.						Check One <input type="checkbox"/> F.O.B. <input type="checkbox"/> C&F <input type="checkbox"/> C.I.F.
SIGNATURE OF SHIPPER (Name, Title & Signature)					DATE	