

# Invoice

<b>FROM</b>
<b>Contact Name:</b>
<b>Phone:</b>

<b>Waybill Number:</b>
<b>Shipment ID:</b>
<b>Invoice No:</b>
<b>Date:</b>
<b>PO No:</b>
<b>Terms of Sale (Incoterm):</b>
<b>Reason for Export:</b>

<b>SHIP TO</b>
<b>Tax ID/VAT No:</b>
<b>Contact Name:</b>
<b>Phone:</b>

<b>SOLD TO INFORMATION</b>
<b>Tax ID/VAT No:</b>
<b>Contact Name:</b>
<b>Phone:</b>

Units	U/M	Description of Goods/Part No.	Harm. Code	C/O	Unit Value	Total Value
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**Additional Comments:**

<b>Declaration Statement:</b>
<b>Shipper</b>
<b>Date</b>

<b>Invoice Line Total:</b>
<b>Discount/Rebate:</b>
<b>Invoice Sub-Total:</b>
<b>Freight:</b>
<b>Insurance:</b>
<b>Other:</b>
<b>Total Invoice Amount:</b>
<b>Total Number of Packages:</b>
<b>Total Weight:</b>
<b>Currency:</b>