

COMMERCIAL INVOICE

Shipper	
Company Name	
Contact / Department	
Telephone / Mobile	
Address	
Country	
Tax ID / VAT / EIN Number	

Receiver	
Company Name	
Contact / Department	
Telephone / Mobile	
Address	
Country	
Tax ID / VAT / EIN Number	

General Details			
Shipment Number		Unit of Measure	<input checked="" type="radio"/> Kg/Cm <input type="radio"/> Lb./In
Invoice Number		Currency	CAD-Canadian Dollar
Reason for Export		Total Gross Weight	

Items List						
	Pieces	Goods Description	Harmonized Code	Country of Origin	Unit Value	Subtotal
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						

DECLARATION:

I/We hereby certify that the information on this invoice is true and that the contents of this shipment are as stated above.

Insurance charges	\$
Other charges	\$
Total number of pieces	
Total declared value	\$

Name: _____ Title: _____ Invoice date: _____ Signature: _____ Company Stamp: _____