

SENT BY:

Name:

Address:

City/Postal Code:

Country:

Tel./Fax. No:

COMMERCIAL INVOICE

No:

SENT TO:

Name:

Attn.:

Address:

City/Postal Code:

Country:

Tel./Fax. No:

AIRBILL No:

.....

Date:

Number of Pieces:

Total Gross Weight:

Total Net Weight:

CARRIER:

Full description of goods	Custom Commodity Code	Country of Origin	Qty	Unit Value and Currency	Sub Total Value and Currency

Total Value and Currency

VALUE FOR CUSTOMS PURPOSE ONLY NO COMMERCIAL VALUE

REASON FOR EXPORT:

TERMS OF DELIVERY:

IF IT REGARDS:

The exporter of the product covered by this document (custom authorization No:)

declares that, except where otherwise clearly indicated, these products are of

preferential origin.

Name:

Signature:

Place and date:

ORIGINAL