

Sender/Exporter:				Invoice			
Phone: VAT/GST No: Overseas Supplier GST No:							
Receiver:				Date:			
				Invoice Number:			
				Shipment Reference			
Phone:							
Importer(Billed to):				Comments:			
				Airway Bill Number:			
Full Description of Goods	Qty	Commodity Code	Unit Value	Subtotal Value	Unit Net Weight	Subtotal Weight	Country of Origin

Total Declared Value:

Total Net Weight:

Total Pieces:

Total Gross Weight:

Payer of GST/VAT:

Currency Code:

Type of Invoice:

Incoterms:

Type of Export:

Terms of Payment:

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

SIGNATURE:

Position in Company

Company Stamp:

Shipping Consultant