

INVOICE

SHIPPER					
		Invoice No:		Page ____ of ____	
		Invoice Date:		Ship Date:	
				File Number:	
CONSIGNEE			BILL TO		
RELATED		NOT RELATED		SOLD	
				NOT SOLD	
SHIPMENT INFORMATION					
Customer PO No:		Letter of Credit No:		Mode of Transportation:	
PO Date:		Currency:		Transportation Terms:	
Ref No:		Payment Terms:		Number of Packages:	
AWB/BL No:		Incoterms Desc:		Gross Weight (kg):	
Item No.	Description Product No., Harmonized No. Country of Origin, Serial No.	Quantity	UOM	Unit Price	Total Price
					Total:

I declare all information contained on this invoice to be true and correct.

SIGNATURE

TITLE

DATE