

TaxID/VAT No:

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| | |
|---|---|
| FROM Contact Name: Phone: | Waybill Number: Shipment ID: Invoice No: Date: PO No: Terms of Sale (Incoterm): Reason for Export: |
| SHIP TO Tax ID/VAT No: Contact Name: <div style="border: 1px solid black; height: 100px; width: 100%;"></div> Phone: | SOLD TO INFORMATION Tax ID/VAT No: Contact Name: Phone: |

| Units | U/M | Description of Goods/Part No. | Harm. Code | C/O | Unit Value | Total Value |
|-------|-----|-------------------------------|------------|-----|------------|-------------|
|-------|-----|-------------------------------|------------|-----|------------|-------------|

Additional Comments:

| | |
|--|---|
| Declaration Statement: Shipper Date | Invoice Line Total: Discount/Rebate: Invoice Sub-Total: Freight: Insurance: Other: Total Invoice Amount: |
| | Total Number of Packages: Currency: Total Weight: |