

SENT BY
 Company name
 Name/Department
 Address
 City/Postal Code
 Country
 Tel./Telex No.
 VAT Registration No.

COMMERCIAL INVOICE

Invoice Number

SENT TO
 Company name
 Name/Department
 Address
 City/Postal Code
 Country
 Tel./Telex No.
 VAT Registration No.

AWB
 Terms of delivery
 Number of pieces
 Total Gross Weight
 Total Net Weight
 Movement certificate type/no

CARRIER

	Customs Commodity Code	Country of Origin	Qty	Unit Value and Currency	Sub Total Value and Currency

Total Value and Currency

REASON FOR EXPORT

I declare that the above information is true and correct to the best of my knowledge
 Date

Signature _____
 Name

The exporter of the products covered by this document declares that, except where otherwise clearly indicated, these products are of preferential origin and the country of origin of the goods is

Place and date
 Signature _____