Commercial Invoice

| Date Bill of Lading/Air Waybill No | | 7.5 | Sandara and Sandar | | | | |
|-------------------------------------|--|---------------------------------------|--|--|--|-------------|--|
| | | | Contact Name | | | | |
| | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Company Name Company Address | | | | |
| Invoice Numbe | r | . 10 55 | | | | | |
| Durchasa Orde | er No. | City | | | | | |
| Pulchase Olde | 9 190, | | State/Province | | | | |
| Terms of Sale | (Incoterm) | Postal Code | Postal Code | | | | |
| 14/11/2/2/2/2/2/2/ | | | Country | | | | |
| Reason for Ex | port | Telephone No. | Telephone No. | | | | |
| | | Email ID | Email ID | | | | |
| SHIP TO | Tax ID/VAT No. | | | | | | |
| | | | Contact Name | | | | |
| Company Nam | e | Company Name | Company Name | | | | |
| Company Address | | Company Addres | Company Address | | | | |
| City | | City | | | | | |
| State/Province | | State/Province | | | | | |
| Postal Code _ | | Postal Code | Postal Code | | | | |
| Country | | Country | | | | | |
| Telephone No. | · | Telephone No. | | | | | |
| | 22 | 1-15 303-25 | | | | | |
| No. Units | Unit of Description of Goods | | | Country | Unit Value | Total Value | |
| No, Units | Measure (Include Harmonized Tariff N | umber if known) | | of Origin | Unit value | Total value | |
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| Additional Co | mments | | | Inv | roice Line Total | | |
| -Additional Co | mments | | | | NESSEGGE DOMING | | |
| Additional Co. | mments | | | Di | iscount/Rebate | 11 | |
| Additional Co. | mments | | | Di | iscount/Rebate voice Sub-Total | | |
| Additional Co. | mments | | | Di | iscount/Rebate | | |
| Additional Co | | | | Di | iscount/Rebate voice Sub-Total | | |
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| | | | | Di Inv F pecify Type): | iscount/Rebate voice Sub-Total reight Charges Insurance | | |
| Declaration S | tatement | Date | | Di Inv pecify Type): Invoice rrency Code | iscount/Rebate voice Sub-Total reight Charges Insurance | | |
| Declaration S | tatement | Date | Cu | Di Inv ecify Type): Invoic rrency Code | iscount/Rebate voice Sub-Total reight Charges Insurance e Total Amount | | |