

COMMERCIAL INVOICE / CUSTOMS DECLARATION

DUTIES & TAXES TO BE PAID BY: *(Tick applicable box)*

Sender

Receiver

Sender	Receiver
Company Name: _____	Company Name: _____
Contact Name: _____	Contact Name: _____
Address: _____ _____	Address: _____ _____
City: _____	City: _____
Post/Zip Code: _____	Post/Zip Code: _____
Country: _____	Country: _____
Tel: _____	Tel: _____
ABN: _____	TAX ID/VAT/EIN#: _____

Consignment Note Number: _____
Number of Pieces: _____ Total Gross Weight: _____

Full Description of Goods	Unit Value	No. Of Items	Total Value
Total Invoice Value			A\$

Origin of Goods: _____
Reason for Export: _____
I declare that the above information is true and correct and does not contain any hazardous material.
Name: _____ Date: _____
Signature: _____
Position: _____