## ***SENT BY***

|  |  |
| --- | --- |
| Company Name: |  |
| Name/Department: |  |
| Address: |  |
| City/Postal Code: |  |
| Country: |  |
| Tel./Fax: |  |
| VAT Reg. No: |  |

## ***SENT TO***

|  |  |
| --- | --- |
| Company Name: |  |
| Name/Department: |  |
| Address: |  |
| City/Postal Code: |  |
| Country: |  |
| Tel./Fax: |  |
| VAT Reg. No: |  |

## ***WAYBILL***

|  |  |
| --- | --- |
| Number of pieces: |  |
| Total Gross Weight: |  |
| Total Net Weight: |  |
| Carrier: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full description of goods | Customs Commodity Code | Country of origin | Quantity | Unit value  | Sub Total Value  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

.

|  |  |
| --- | --- |
| Total Value FOB: |  |
| Freight: |  |
| Insurance: |  |
| Total Value CIF: |  |

Currency of invoice:

Terms of Transportation (INCOTERMS-1990):

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

Signature: Name: Place and date: