INVOICE

Invoice No:

Date:

Due Date:

Waybill/Tracking No:

SENDER (SHIPPER)

RECIPIENT (CONSIGNEE)

SERVICE TYPE

PAYMENT MODE

ORIGIN

DESTINATION

NO. OF PIECES

WEIGHT (KG/LBS)

DIMENSIONS

P.O. NUMBER

ITEM	DESCRIPTION OF GOODS/SERVICES	QTY	UNIT RATE	AMOUNT

ITEM	DESCRIPTION OF GOODS/SERVICES	QTY	UNIT RATE	AMOUNT

SPECIAL INSTRUCTIONS / DELIVERY NOTES

Freight Charge:	
Fuel Surcharge:	
Handling/Other:	
Tax/VAT:	
Total Due:	

AUTHORIZED SIGNATURE