

**COMMERCIAL INVOICE SHOULD BE COMPLETED FOR DELIVERY OF COMMERCIAL GOODS  
(FOR SALE)**

**PRINT COMMERCIAL INVOICE ON CONSIGNORS LETTERHEAD SHOWING LEGAL ADDRESS  
ORIGINAL COMMERCIAL INVOICE SHOULD BE SUBMITTED (NOT A COPY)  
ALL GREY FIELDS MUST BE COMPLETED**

**COMMERCIAL INVOICE**

**Invoice No** Insert Invoice number  
**Date** Insert date of Invoice

<p><b><u>Invoice Address (no private individuals):</u></b> Put legal address and name of CNEE company in accordance with registration docs of CNEE</p>	<p><b><u>Delivery terms (Incoterms)</u></b> Put delivery terms (Incoterms) as per trade contract</p>
<p><b><u>Ship to (no private individuals):</u></b>  Put delivery address of CNEE (where the Goods should be delivered to after Clearance as per airwaybill)</p> <p><b><u>Contact person:</u></b> First name and family name of contact person of CNEE</p> <p><b><u>Phone:</u></b> Phone number of contact person of CNEE for clearance and delivery</p>	<p><b><u>Delivered under:</u></b> Put number and date of trade contract</p> <p><b><u>Payment terms</u></b> Put terms of payment as per trade contract (check that cnee is able to keep indicated terms!)</p>

No item	Description	Country of origin	Net weight/kg	HS Code	Qty (pieces)	Unit price, USD	Total price, USD
1.	<b>PUT FULL DETAILED DESCRIPTION OF THE GOODS:</b>  <b>PURPOSE OF USE;</b>  <b>MATERIAL;</b>  <b>TRADE MARK;</b>  model/part number/serial number/article/technical parameters/chemical composition	<b>PUT COUNTRY OF ORIGIN</b>  <b>NAME OF MANUFACTURER</b>	Indicate net weight per each line/position	Put HS code of each item	Indicate quantity per each line/position	Insert retail value. Attach proof of value: e.g. 1) pricelist or 2) proof of payment or 3) export declaration copy etc	Insert Total retail value
2.							
<b>Total, USD</b>							<b>Total goods value</b>

<b>Insurance cost, USD:</b>	Put insurance amount as per Insurance certificate if Goods are insured;
<b>Freight cost, USD:</b>	Put transportation cost amount (for Incoterms DDU, CPT, CIP, CIF);
<b>Total for payment, USD:</b>	Put total amount: total price, insurance amount (if Goods insured), transportation cost (transportation cost for DDU, CPT, CIP, CIF)

<b>Gross Weight, kg (total) :</b>	Put total gross weight of the shipment (should match weight on airwaybill)
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<b>Signed by:</b>	Authorized representative of CNOR must put his signature here and a stamp of CNOR's company (if available)
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