INVOICE

SHIPPER(ご依頼主):	CONSIGNEE(お届け先):
Address:	Address:
Company Name:	Company Name
Att:	Att:
Tel:	Tel:

Description of goods (内容品の記載)	Material (素材)	NEW	USED	QTY (数量)	Unit Value (単価)	Total Value (合計)
Grand Total (合計)					F.O.B USA	

Country of Origin (品物の原産国)

_____

Gross Weight (総重量)

_____ KG

Net Weight (正味重量)

_____ KG

☐ Commercial Cargo (有償)
☐ No Commercial Value (無償)
☐ Personal Gift (贈り物)
☐ Sample (見本品)
☐ Advertising materials (宣伝品)
☐ Others(その他)

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