	A INVOICE					5
Invoice Date:			Invo	ice No:		
Shippers Inform	nation		Cons	signee Infori	mation	
Company Name:		Co	ompany Name:			
Contact Name:			ontact Name:			
Contact Number:			ontact Number:			
Address:		A	ddress:			
		-				
		-				
Post/Zip code:		Po	ost/Zip code:			
Country:			ountry:			
Shippers VAT / EORI			Consignee VAT /			
/ Tax ID			EORI / Tax ID			
HAWB:	Pieces:		Total	Weight:		
<b>Full</b> Description of Goods (in p the country of manufacture		-	Tariff Code	Items	Unit	Total
		/11.			Value	Value
		/11.			Value	Value
					Value	Value
					Value	Value
					Value	Value
					Value	Value
					Value	Value
					Value	Value
					Value	Value

Reason for Export:		Terms of delivery:	Total Value GBP	
			£0.00	

For and on behalf of the above named company, I declare that the products covered in this document are not subject to any export/import prohibitions & restrictions.

Signed on behalf of the shipper:	Name in print:			