



1. Vendor (Name and Address)	2. Date of Direct Shipment to Canada
	3. Other References (Include Purchaser's Order No.)
	5. Purchaser's Name and Address (if other than Consignee)
4. Consignee (Name and Address)	6. Country of Transhipment
	7. Country of Origin of Goods
	If shipment includes goods of different origins enter origins against items in 12.
	9. Conditions of Sale and Terms of Payment (ie. Sale, Consignment Shipment, Leased Goods, etc.)
8. Transportation: Mode and Place of Direct Shipment to Canada	10. Currency of Settlement

11. No of Pkgs.	12. Specification of Commodities (Kind of Packages, Marks and Numbers General Description and Characteristics, ie. Grade Quality)	13. Quantity (State Unit)	Selling Price	
			14. Unit Price	15. Total

18. If any fields 1 to 17 are included on an attached commercial invoice, check this box. Commercial Invoice No. _____ <input type="checkbox"/>	16. Total Weight	17. Invoice Total
	Net	Gross

19. Exporter's Name and Address (if other than Vendor)	20. Originator (Name and Address)
21. Departmental Ruling (if applicable)	22. If fields 23 to 25 are not applicable, check this box. <input type="checkbox"/>

23. If include in in field 17 indicate amount: (i) Transportation charges, expenses and insurance from place of direct shipment to Canada \$ _____ (ii) Costs for construction, erection and assembly incurred after importation into Canada. \$ _____ (iii) Export packing \$ _____	24. If not included in field 17 indicate amount: (i) Transportation charges, expenses and insurance to the place of direct shipment to Canada. \$ _____ (ii) Amounts for commissions other than buying commissions \$ _____ (iii) Export packing \$ _____	25. Check (if applicable): (i) Royalty payments or subsequent proceeds are paid or payable by the purchaser. <input type="checkbox"/> (ii) The purchaser has supplied goods or services for use in the production of these goods. <input type="checkbox"/>
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