



**SAN JOSÉ STATE
UNIVERSITY**

**COMMERCIAL INVOICE
DISTRIBUTION SERVICES**

Finance – One Washington Square - San José, CA 95192-0008

408-924-1558 - 408-924-1597 (fax)

This form is required for all outgoing shipments outside the USA. Complete all sections and submit along with a completed Shipment Request form. Contact Distribution Services, at extension 4-1592, to request pick-up of completed forms, attachments (if any), and items to be shipped.

Required Information:

| | |
|---|--|
| Date of Exportation: _____ | RMA Number (if applicable): _____ |
| Country of Export: _____ | Country of Destination: _____ |
| Country of Manufacture: _____ | Air Waybill Number: _____ |
| Shipper/Exporter (Origin) | |
| Sender's Name: _____ | Phone Number: _____ |
| Department Name: _____ | Extended Zip: _____ |
| Please check all that apply: | |
| <input type="checkbox"/> No commercial value/promotional material | <input type="checkbox"/> Will be returned to USA |
| <input type="checkbox"/> Repair | <input type="checkbox"/> Other _____ |
| Consignee (Destination) | |
| Company Name: _____ | Contact Name: _____ |
| Delivery Address: _____ | |
| Country: _____ | Zip: _____ Phone Number: _____ |

Shipment Description:

| Quantity: | Unit of Measure: | Detailed Description of Goods: | # of Packages: | Package Type: | Weight: | Unit Value: | Total Value: |
|---------------------------|------------------|--------------------------------|----------------|------------------|---------|-----------------|--------------|
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| Total Number of Packages: | | | | Total Weight: | | Total Value: | |

Authorization:

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| <ul style="list-style-type: none"> • <i>These commodities licensed by the U.S. for the ultimate destination _____ diversion contrary to U.S. law prohibited.</i> • <i>I/we hereby certify that the information on this invoice is true and correct and that the contents of this shipment are as stated above.</i> • <i>I/we do hereby authorize _____ to execute any additional documents necessary for the export of merchandise described herein on my/our behalf.</i> |
| Sender's Signature: _____ Shipping Clerk's Signature: _____ |