

COMMERCIAL INVOICE & PACKING LIST

Shipper:**Consignee:**

Booth:

Company:

Event:

c/o EAX Worldwide, LLC

TAX ID#:

www.eaxww.com ~ info@eaxww.com

Phone: 619-668-1565 Fax: 619-668-9078

[illegible]

REMARKS

T = Temporary Entry

P = Permanent Entry

G = Give Away Items

GRAND TOTAL:

USD

Authorized Signature of Shipper/Agent:

Date:

Page _____ of _____