*Customer’s name/address goes here.*

**COMMERCIAL INVOICE**

|  |  |  |  |
| --- | --- | --- | --- |
| Consignee: | ABB INC. | Date: |  |
| Attention: | Warranty Repair | Phone: | 800-752-0696 opt 1 |
| Address: | 5000 South Emmer Drive | Fax: |  |
|  | New Berlin, WI 53151 | Reference No: | RMA: # |
|  | USA | IncoTerm: | DDP  |
|  |  | EIN #: | 36-3100018DP |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Qty** | **Description** | **Country of Mfg** | **HTS#** | **ECCN** | **Item Value** | **Extended value** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**VALUE FOR CUSTOMS PURPOSES ONLY Total Value USD**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Packages: \_\_\_\_\_\_\_\_\_ Total Weight: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Returning Canadian shipments:** Broker: Livingston International, USCST04@livingstonintl.com Telephone: 800-437-4324 X 7028 Account 528073.

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.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Title