



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

National Institutes of Health
Bethesda, Maryland 20892

Building: _____

Room: _____

COMMERCIAL INVOICE

RECEIVER'S COMPLETE ADDRESS AND PHONE NUMBER

NUMBER OF PACKAGES AND DETAILED LISTING OF CONTENTS

(If biologics or chemicals, etc., note if infectious or harmful to humans, dry ice, milliliters, kilograms, etc., If not, state as such.)

COUNTRY OF ORIGIN: _____

COUNTRY OF ULTIMATE DESTINATION: _____

REASON FOR EXPORT: _____

TOTAL COMMERCIAL VALUE: _____

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/we do hereby authorize the selected carrier to execute any additional documents necessary for the export of goods described herein on my/our behalf.

Typed Name of Sender		Title of Sender	
Signature		Date	



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

National Institutes of Health
Bethesda, Maryland 20892

Building: _____

Room: _____

COMMERCIAL INVOICE

RECEIVER'S COMPLETE ADDRESS AND PHONE NUMBER

NUMBER OF PACKAGES AND DETAILED LISTING OF CONTENTS

(If biologics or chemicals, etc., note if infectious or harmful to humans, dry ice, milliliters, kilograms, etc., If not, state as such.)

COUNTRY OF ORIGIN: _____

COUNTRY OF ULTIMATE DESTINATION: _____

REASON FOR EXPORT: _____

TOTAL COMMERCIAL VALUE: _____

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/we do hereby authorize the selected carrier to execute any additional documents necessary for the export of goods described herein on my/our behalf.

Typed Name of Sender		Title of Sender	
Signature		Date	

NIH 1884-1 (11/19)

White copy

Each copy must be signed with an original signature.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

National Institutes of Health
Bethesda, Maryland 20892

Building: _____

Room: _____

COMMERCIAL INVOICE

RECEIVER'S COMPLETE ADDRESS AND PHONE NUMBER

NUMBER OF PACKAGES AND DETAILED LISTING OF CONTENTS

(If biologics or chemicals, etc., note if infectious or harmful to humans, dry ice, milliliters, kilograms, etc., If not, state as such.)

COUNTRY OF ORIGIN: USA _____

COUNTRY OF ULTIMATE DESTINATION: _____

REASON FOR EXPORT: _____

TOTAL COMMERCIAL VALUE: _____

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/we do hereby authorize the selected carrier to execute any additional documents necessary for the export of goods described herein on my/our behalf.

Typed Name of Sender		Title of Sender	
Signature		Date	

NIH 1884-1 (11/19)

White copy

Each copy must be signed with an original signature.

Information for Completing "Commercial Invoice"
(Form NIH 1884-1)

When should I prepare a commercial invoice?

The best rule of thumb is to ***always*** prepare a commercial invoice for your international shipments (except for letters). Since the rules vary and are constantly changing from country to country, using the commercial invoice ensures that your shipment will be delivered directly to the receiver's address. Following this rule will help avoid delays in clearing your shipment through customs.

What happens to a package that does not have a commercial invoice?

When the shipment does not have the required commercial invoice, the package will be delivered to the nearest customs airport. The carrier's agent then notifies the receiver who must arrange for customs clearance and delivery. The receiver pays for customs taxes and delivery charges. If you wish, you may let the receiver know the flight information so that he or she can be at the airport when the shipment arrives, and to clear and pick up the package. (To obtain flight information, call the shipping office on 496-5921, after 3 p.m. on the day of shipment.)

What are some helpful hints in preparing a commercial invoice?

1. Please type the form. Fill in your complete address in the letterhead (building, room, and phone number).
2. Type the receiver's complete address and phone number. Do not use P.O. box addresses!
3. Be specific in describing the contents of your shipment. If you have "biologics" or "chemicals," explain what kind, and whether or not it is hazardous, infectious, or harmful to humans. Include the amount (i.e. 25 milliliters), and how it is packaged (in 30 lbs. of dry ice, wet ice, or ice packs, etc.). If a permit or shipper's declaration is included with your paperwork, state it in this section of the invoice.
4. If you are sending printed matter or something that is priceless (i.e. biologics, chemicals, samples, type "\$5.00" for the Total Commercial Value. If, however, you are sending equipment, medical supplies, tapes, etc., estimate the current commercial resale value, and use this figure.

Note: State whether you want "airport" or "door to door" service in Item 15 ("Additional Information") of Form NIH 1884, "Request for Shipment."