Provider of statistical information: N° LU: _ _ _ _ _ _ _

Name / Postal adress:

Contact:
Tel.:
Email adress:

INTRASTAT

Extended detailed declaration

Month / Year

DISPATCH

Member state of destination *(2 letters)*	Nature of transaction *(2 digits)*	Mode of transport *(1 digit)*	Commodity code *(8 digits)*	Net Mass in Kg *(no decimals)*	Supplementary statistical unit *(no decimals)*	Invoiced value in Euro *(no decimals)*	Statistical value in Euro *(no decimals)*