

PRO-FORMA INVOICE

Date of Invoice:		Invoice no:			
From Shipper (Name & Address):		To Consignee (Name, Address, & Contact):			
Telephone Number:		Telephone:			
Shipper's VAT number:		Consignee's VAT/Tax ID:			
Country of Ultimate Destination:		Importer (if other than consignee)			
Terms of Trade:					
Invoice Currency:					
		Tel:			
Full Description of Goods (including Commodity Code if known):	Country of Origin	Quantity	Weight	Unit value	Total line value:
Total Number of Packages:		Total Weight:		Total Value:	
Reason for export:					
Declaration: I hereby declare that all the above information contained in this invoice is true and correct.					
Signature:			Print:		
Position			Date:		