

PRO-FORMA INVOICE

| Date of Invoice: | | | Invoice no: | | | |
|---|----------------|-------------------|--|--------|--------------|-------------------|
| From Shipper (Name & Address): | | | To Consignee (Name, Address, & Contact): | | | |
| | | | Email Address: | | | |
| Telephone Number: | | | Telephone Number: | | | |
| Shipper's VAT Number: | | | Consignee's VAT/Tax ID: | | | |
| Shipper's EORI Number: | | | Consignee's EORI Number: | | | |
| Country of Ultimate Destination: | | | Importer (if other than consignee) | | | |
| Terms of Trade: <i>DAP/DDP</i> | | | | | | |
| Invoice Currency: | | | | | | |
| | | | Tel: | | | |
| Full Itemised Description of Goods | Commodity Code | Country of Origin | Quantity | Weight | Unit value | Total line value: |
| | | | | | | |
| Total Number of Packages: | | | Total Nett 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: | | | |