

# PROFORMA INVOICE

Date: \_\_\_\_\_

Invoice #: \_\_\_\_\_

## EXPORTER / SHIPPER

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_

Country: \_\_\_\_\_

Tax ID/VAT: \_\_\_\_\_

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## CONSIGNEE (SHIP TO)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Postal: \_\_\_\_\_

Country: \_\_\_\_\_

Contact/Phone: \_\_\_\_\_

## SHIPPING INFORMATION

Mode of Transport: \_\_\_\_\_

Incoterms 2020: \_\_\_\_\_

Port of Loading: \_\_\_\_\_

Port of Discharge: \_\_\_\_\_

Country of Origin: \_\_\_\_\_

Description of Goods	HS Code	Qty	Unit	Unit Price (USD)	Total (USD)

Subtotal: \_\_\_\_\_

Shipping/Freight: \_\_\_\_\_

Insurance: \_\_\_\_\_

**Total Value:** \_\_\_\_\_

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## PAYMENT TERMS

Currency: \_\_\_\_\_

Bank Name: \_\_\_\_\_

SWIFT/BIC: \_\_\_\_\_

IBAN/Account: \_\_\_\_\_

**PACKAGE DETAILS**

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Total Net Weight: \_\_\_\_\_

Total Gross Weight: \_\_\_\_\_

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

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Declaration: We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

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Authorized Signature & Stamp