

# PROFORMA INVOICE

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

## EXPORTER / SHIPPER

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Country: \_\_\_\_\_  
Contact/Phone: \_\_\_\_\_  
Tax ID/VAT: \_\_\_\_\_

## CONSIGNEE / SHIP TO

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Country: \_\_\_\_\_  
Contact/Phone: \_\_\_\_\_  
Tax ID/VAT: \_\_\_\_\_

## SHIPPING DETAILS

Mode of Transport: \_\_\_\_\_  
Port of Loading: \_\_\_\_\_  
Port of Discharge: \_\_\_\_\_  
Estimated Ship Date: \_\_\_\_\_

## PAYMENT & TERMS

Currency: \_\_\_\_\_  
Incoterms: \_\_\_\_\_  
Payment Terms: \_\_\_\_\_  
Reason for Export: \_\_\_\_\_

Description of Goods	HS Code	Qty	Unit	Unit Price	Total Value

Description of Goods	HS Code	Qty	Unit	Unit Price	Total Value

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

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

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

**TOTAL AMOUNT:** \_\_\_\_\_

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**Declaration:** We certify that this invoice is true and correct and that the contents of this shipment are as stated above.

**Package Details:** Total Weight: \_\_\_\_\_ kg | Total Packages: \_\_\_\_\_

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Authorized Signature & Stamp