

PROFORMA INVOICE

EXPORTER (SHIPPER) [Name] [Address] [Contact Details]
DATE & REFERENCE Date: Proforma No: Customer Ref:
CONSIGNEE [Name] [Address] [Country]
NOTIFY PARTY [Same as Consignee or Specific Agent]
PORT OF LOADING
PORT OF DISCHARGE
VESSEL / VOYAGE NO.
TERMS OF DELIVERY AND PAYMENT Incoterms: Method of Payment:

Marks & Nos.	Description of Goods	Quantity	Unit Price	Total (USD)

Subtotal:
Freight & Insurance:
TOTAL INVOICE VALUE:
ADDITIONAL INFORMATION / REMARKS Country of Origin: Total Gross Weight: Total Volume (CBM):

I/We hereby certify that this invoice is true and correct and that the goods are of the origin stated above.

Authorized Signature