

PROFORMA INVOICE

[Company Name]
[Street Address]
[City, State, Zip]
[Tax ID/VAT Number]

Invoice #: [0000]
Date: [YYYY-MM-DD]
Expiry Date: [YYYY-MM-DD]
Ref/PO #: [Reference]

SELLER / EXPORTER

[Contact Name]
[Phone Number]
[Email Address]

BILL TO / SHIP TO

[Customer Company Name]
[Customer Address]
[Contact Phone]

SKU / Item #	Description	Qty	Unit Price	Total
[SKU-001]	[Product Name/Specifications]	[0]	\$0.00	\$0.00
[SKU-002]	[Product Name/Specifications]	[0]	\$0.00	\$0.00

Subtotal: \$0.00
Wholesale Discount ([0] %): (\$0.00)
Estimated Shipping: \$0.00
Tax / VAT: \$0.00

Total Amount Due: \$0.00

PAYMENT INSTRUCTIONS

Bank: [Bank Name]
Account Name: [Name]
IBAN/SWIFT: [Code]
Payment Terms: [e.g., 50% Deposit]

SHIPPING INFORMATION

Method: [Sea/Air/Ground]
Incoterms: [e.g., FOB, EXW]
Lead Time: [Number] Weeks

Note: This is a proforma invoice provided for quotation purposes. Goods will be dispatched only upon receipt of cleared funds as per the terms stated above.