

PROFORMA INVOICE

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

Date: _____
Invoice #: _____
P.O. #: _____

BILL TO:

SHIP TO:

SKU / Item #	Description	Qty	Unit Price	Total

Subtotal: \$0.00
Shipping: \$0.00
Tax: \$0.00
Total Amount: \$0.00

Payment Terms: [Net 30 / COD / Wire Transfer]

Banking Details: Bank Name: _____ | Swift: _____ | Account: _____

Note: This is a proforma invoice for wholesale order processing. Goods will be dispatched upon payment confirmation.