

PROFORMA INVOICE

[Company Name]
[Address Line 1]
[Address Line 2]
VAT/Tax ID: [Number]

PI Number: _____

Date: _____

Expiry Date: _____

BILL TO [Client Name]
[Client Address]
[City, Country]
[Tax ID / VAT Number]
SHIPPING DETAILS [Consignee Name]
[Shipping Address]
[Shipping Method / Incoterms]
Port of Loading: [Port Name]

SKU / ITEM	DESCRIPTION	QTY	UNIT PRICE	TOTAL

PAYMENT INSTRUCTIONS

Bank Name: [Name]
Swift/BIC: [Code]
IBAN/Account: [Number]
Beneficiary: [Name]

Authorized Signatory

Subtotal: 0.00

Tax/VAT: 0.00

Shipping: 0.00

Total Payable: USD 0.00

Terms and Conditions: Goods remain the property of [Company Name] until payment is received in full. This proforma invoice is valid for 30 days. Delivery lead time starts upon receipt of advance payment.