

PROFORMA INVOICE

Life Support Systems Ltd.
Engineering Division
123 Oxygen Way, Tech Park

Invoice #: _____

Date: _____

Expiry Date: _____

BILL TO:

SHIP TO / INSTALLATION SITE:

Item #	Description of Life Support Components	Qty	Unit Price	Total
1	Oxygen Generation Module (LSS-O2-X1)			
2	CO2 Scrubber Assembly / Rebreather Unit			
3	Atmospheric Monitoring Sensors (Quad-Gas)			

Item #	Description of Life Support Components	Qty	Unit Price	Total
4	Pressure Regulation & Backup Supply Valve Kit			
5	Installation, Calibration & Safety Certification			

Subtotal: _____
Shipping / Freight: _____
Tax / VAT: _____
Total Due (USD): _____

Payment Terms: 50% Advance for order processing, 50% prior to dispatch.

Notes: Lead time is approximately __ weeks from receipt of deposit. Valid for 30 days.

Bank Details: SWIFT: _____ | Account: _____