

PROFORMA INVOICE

[Your Company Name]
[Street Address]
[City, State, Zip]
Phone: [000-000-0000]

DATE: [MM/DD/YYYY]
INVOICE #: [PRO-0000]
VALIDITY: [30 Days]

BILL TO:

[Customer Name]
[Company Name]
[Address Line 1]
[Address Line 2]

SHIPPING DESTINATION:

[Project Site Name]
[Site Address]
[Contact Person Name]

Description (Material Type / R-Value)	Dimensions/Thickness	Quantity	Unit Price	Total
Fiberglass Batt Insulation	[e.g. 15" x 48"]	[0] Bags	\$0.00	\$0.00
Rigid Foam Board (EPS/XPS)	[e.g. 4' x 8' x 2"]	[0] Sheets	\$0.00	\$0.00
Spray Foam Kit	[e.g. 600 Board Ft]	[0] Units	\$0.00	\$0.00
Mineral Wool Slabs	[e.g. 24" x 48"]	[0] Packs	\$0.00	\$0.00

Subtotal: \$0.00
Tax (___%): \$0.00
Shipping/Freight: \$0.00

Total Amount: \$0.00

PAYMENT TERMS & NOTES:

- 50% deposit required to initiate order.
- Lead time: Approximately [0] business days from payment.
- Bank Details: [Bank Name] | SWIFT: [Code] | Account: [Number]

This is a Proforma Invoice only. Goods will not be dispatched until final payment is confirmed.