PROFORMA INVOICE

Invoice #: _____
Date: _____

[Exporter Company Name]
[Address Line 1]
[City, Country]
[Tax ID/VAT Number]

Consignee / Importer: [Company Name]
[Address Line 1]
[City, State, Zip]
[Country]
[Contact Phone]
Shipment Details: **Port of Loading:** _____
Port of Discharge: _____
Mode of Transport: [Sea / Road / Rail]
Incoterms: [e.g. CIF, FOB, EXW]

Description of Agricultural Oil	HS Code	Quantity (MT)	Unit Price	Total Amount
[e.g. Crude Sunflower Oil / Refined Soybean Oil]				
[e.g. Grade/Quality Specification]				

Subtotal: [Currency] _____
Freight/Insurance: [Currency] _____
Grand Total: [Currency] _____

Payment & Banking Terms:

Bank Name: _____
SWIFT/BIC: _____
IBAN/Account #: _____
Payment Method: [e.g. Letter of Credit / T.T. Advance]

Packaging: [e.g. Flexitank / 210L Drums / IBC Tote]
Country of Origin: _____

Authorized Exporter Signature

Buyer Acceptance / Stamp