

# PROFORMA INVOICE

Date:

P.I. Number:

Exporter:

Company Name

Address Line 1

Country / Tax ID

CONSIGNEE / IMPORTER

Name:

Address:

Country:

Contact/Phone:

SHIPPING DETAILS

Port of Loading:

Port of Discharge:

Incoterms:

Estimated Shipment Date:

| Description of Goods (Nuts/Berries) | HS Code | Quantity | Unit | Unit Price | Total (USD) |
|-------------------------------------|---------|----------|------|------------|-------------|
|                                     |         |          |      |            |             |
|                                     |         |          |      |            |             |
|                                     |         |          |      |            |             |

PAYMENT INSTRUCTIONS / BANKING

Bank Name:

SWIFT/BIC:

Account Number/IBAN:

NOTES

Phytosanitary Certificate required.

Subtotal:

Freight/Insurance:

Total Amount:

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Authorized Signature