PROFORMA INVOICE

[Supplier Name]
[Address Line 1]
[City, State, Zip]
VAT/Tax ID: [Number]

Date: [Date]
Quote #: [Number]
Valid Until: [Date]

BILL TO:
[Customer Name]
[Customer Address]
[Contact Email/Phone]
SHIP TO:
[Shipping Address]
[Shipping Method]
[Estimated Lead Time]

Part Number / SKU	Description	Qty	Unit Price	Total
[Part #]	[Component Name / Specs]	[Qty]	[0.00]	[0.00]
[Part #]	[Component Name / Specs]	[Qty]	[0.00]	[0.00]
			Subtotal:	[0.00]
			Shipping:	[0.00]
			Tax:	[0.00]

Part Number / SKU	Description	Qty	Unit Price	Total
			Total ([Currency]):	**[0.00]**

PAYMENT INSTRUCTIONS (Wire Transfer)
Bank Name: [Bank Name]
SWIFT/BIC: [Code]
IBAN/Account #: [Number]
Beneficiary: [Supplier Name]

Goods remain property of [Supplier Name] until full payment is received.
Subject to [Country/State] jurisdiction and standard Terms & Conditions.