PROFORMA INVOICE

No: _____
Date: _____

[Supplier Name]
[Electronics Division]
[Street Address]
[City, State, Zip]
[VAT/Tax ID]

BILL TO:

_____
_____
_____
Contact: _____

SHIPPING DETAILS:

Method: _____
Payment Terms: _____
Currency: _____
ETA: _____

SKU / Part No.	Description of Goods	HS Code	Qty	Unit Price	Amount

Subtotal: _____
Shipping/Handling: _____
Tax / VAT: _____

Total Payable: _____

BANK TRANSFER DETAILS:
Bank Name: _____ | SWIFT/BIC: _____
IBAN/Account: _____

Note: This is a Proforma Invoice, not a Tax Invoice. Goods will be dispatched upon receipt of cleared funds.