

PROFORMA INVOICE

Date: [Date]
Number: [PI-0000]

[Seller Company Name]
[Address Line 1]
[City, State, Zip]
[Email/Phone]

Bill To:

[Buyer Name/Company]
[Address Line 1]
[Address Line 2]
[VAT/Tax ID]

Ship To:

[Recipient Name]
[Shipping Address]
[City, State, Country]
[Phone Number]

Item Description	SKU	Qty	Unit Price	Total
[Product Name]	[SKU-ID]	0	\$0.00	\$0.00
[Product Name]	[SKU-ID]	0	\$0.00	\$0.00

Subtotal: \$0.00
Shipping: \$0.00
Tax: \$0.00

Total: \$0.00

Payment Instructions & Terms

Bank Name: [Name]
SWIFT/BIC: [Code]
Account Number: [Number]

Terms: This is a proforma invoice and not a request for payment. Goods will be dispatched upon receipt of confirmed order/payment.
Validity: 30 days.