

Proforma Invoice

Invoice No: _____ | Date: _____

Exporter (Seller):

Company Name: _____
Address: _____

Phone: _____
Email: _____

Importer (Buyer):

Company Name: _____
Address: _____

Phone: _____
Email: _____

Consignee:

Name/Company: _____
Address: _____

Contact: _____

Shipment Details:

Country of Origin: _____
Country of Destination: _____
Port of Loading: _____
Port of Discharge: _____
Mode of Transport: _____

Goods Information

No.	Description of Goods	HS Code	Quantity	Unit	Unit Price	Total
1	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____
Subtotal						_____
Freight						_____
Insurance						_____
Total Invoice Value						_____
Currency: _____						

Terms and Conditions

- Incoterms: _____
- Payment Terms: _____
- Estimated Time of Shipment: _____
- Other Terms: _____

Authorized Signature

Company Stamp
