

# PROFORMA INVOICE

Not being in possession of a commercial seller's or shipper's invoice, I request that you accept the statement of value or the price paid in the form of an invoice submitted below. (19CFR 141.85)

SHIPPER	
	Page ____ of ____
	Invoice Date: <span style="float: right;">Ship Date:</span>
	File Number:
CONSIGNEE	BILL TO

--- SHIPMENT INFORMATION ---		
Customer PO No:	LettNumer:	Mode of Transportation:
PO Date:	Currency:	Transportation Terms:
Ref No:	Payment Terms:	Number of Packages:
AWB/BL No:	Incoterms Desc:	Gross Weight(Kg):

Item No	Description Product No., Harmonized No. Country of Origin, Serial No.	Quantity	UOM	Unit Price	Total Price

I declare all information contained on this invoice to be true and correct.

SIGNATURE	TITLE	DATE
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