

PRO - FORMA INVOICE

1 CONSIGNEE (Complete name and address)	5 DATE
	6 EXPORT REFERENCE
	7 OTHER REMARKS
2 ATTENTION First Name Last Name	
3 TEL	CARRIER Traders Customs Brokerage LTD Telephone: 1-800-461-6762 2359 Royal Windsor Drive Mississauga, Ontario Fax: (905) 855-1375 L5J 4S9, Canada
4 FAX <input type="checkbox"/>	

TYPE OF PACKAGING	DETAILED DESCRIPTION OF GOODS	COUNTRY OF ORIGIN (or) MANUFACTURE	QTY	UNIT VALUE	SUBTOTAL
8	9	10	11	12	13
14 TOTAL PACKAGES	15 REASON FOR EXPORT			16 TOTAL WEIGHT	17 TOTAL VALUE

I/we hereby certify that the information on this invoice is true and that contents of this shipment are as stated above.

18 SIGNATURE: _____ **TITLE:** _____