PRO FORMA INVOICE **PROTECTED WHEN COMPLETED**

Exporter, Shipper, Seller

Tax ID #

Consignee

Tax ID #

Buyer (if other than Consignee)

Tax ID #

Exporting Carrier | Freight Rate

Port of Entry

Destination (country / state)

Customs Clearance By:

GHY USA, INC.

572 South 5th Street, Pembina, North Dakota 58271

Locations in Pembina, Emerson, Dunseith, Fargo and Roseau

Please direct all release requests to:

PEMBINA **PHONE: (701) 825-6474 • FAX: (701) 825-6482**

TOLL-FREE PHONE: (888) 825-0002

PAPS Filer Code: DN2

Exp. Ref No.

Terms of Sale – Delivery – Payment

DUTY AND/OR BROKERAGE CHARGES

☐ Shipper ☐ Consignee ☐ Buyer ☐ Other

Parties to this transaction are ☐ Related ☐ Not Related

Invoice Date | Invoice Number | Currency of Sale

DECLARATION BY FOREIGN SHIPPER U.S. GOODS ONLY

I DECLARE THAT THE ARTICLES HEREIN SPECIFIED ARE TO THE BEST OF MY KNOWLEDGE AND BELIEF THE GROWTH, PRODUCE OR MANUFACTURE OF THE UNITED STATES, THAT THEY WERE EXPORTED FORM THE UNITED STATES FROM:

THE PORT OF _____ ON OR ABOUT _____

THAT THEY ARE RETURNED WITHOUT HAVING BEEN ADVANCED OR IMPROVED IN CONDITION BY ANY PROCESS OR MANUFACTURE OR OTHER MEANS SIGNATURE:

Indicate Country/Province of Origin	No. & Kind of Pkgs.	Invoice Item Description / HS Tariff Classification Code	Unit Quantity	Unit Price	Invoice Total

INVOICE TOTAL

If goods are not sold, state reason for export

Above prices include ☐ Duty ☐ Brokerage ☐ Freight

Estimated Freight Charges to destination Currency

Gross Weight **KGM**

Mode of Transport from point of exit ☐ Road ☐ Rail ☐ Water ☐ Air ☐ Other

Status ☐ Owner ☐ Agent

I hereby certify that the information given above and on the continuation sheet(s), if any, is true and complete in every respect.

Give firm name and address if different from exporter above:

Signature: _____ Date: _____

No. of Pages _____

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