



# PROFORMA

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Invoice #: Inv0001

Invoice Date: 04/30/2024

Shipment/PAPS# FDEX123456

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EXPORTER, SELLER EXPORTATEUR, VENDEUR <b>Exporter Name</b> 1245 st, #2345 Quebec G5V 4T5 QC CA  IRS NUMBER: 12-786544500      FDA# FE4567	PRODUCER OF GOODS (IF DIFFERENT THAN EXPORTER) FABRICANT DES MARCHANDISES (SI AUTRE QUE L'EXPORTATEUR) <b>Producer Name</b> 568 st, #257 Montreal J4W 1M7 QC CA  IRS NUMBER: 10-985722300      FDA# FP45698
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SHIPPED TO EXPÉDIÉ À <b>Shipper Name</b> 6950, One BOULEVARD Barclay 32578 MD US  IRS NUMBER: 89-54732145      FDA#	BUYER (IF DIFFERENT THAN CONSIGNEE) ACHETEUR (SI AUTRE QUE LE DESTINATAIRE) <b>Buyer Name</b> 5324, 23th Ave Barton 32789 MI US  IRS NUMBER: 78-589123547      FDA#
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PARTIES TO THIS TRANSACTION ARE LES TRANSACTIONNAIRES SONT  <input type="checkbox"/> RELATED ASSOCIÉS <input checked="" type="checkbox"/> NOT RELATED NON ASSOCIÉS	COUNTRY OF FINAL DESTINATION (IF OTHER THAN U.S.A.)	U.S. DUTY / BROKERAGE FOR ACCOUNT OF DROITS DE DOUANE/COURTAGE É.-U. POUR LE COMPTE DE: <input checked="" type="checkbox"/> EXPORTER / EXPORTATEUR <input type="checkbox"/> SHIP TO CONSIGNEE / EXPÉDIÉ AU DESTINATAIRE <input type="checkbox"/> OTHER (SPECIFY) / AUTRE
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CARRIER <b>Fedex</b>	SHIPPING WEIGHT <input type="checkbox"/> LBS 903 <input checked="" type="checkbox"/> KG	ESTIMATED DATE OF ARRIVAL <b>04/30/2024</b>
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MODE OF TRANSPORT <b>Truck</b>	PORT OF ENTRY <b>1002 - Albany</b>	
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ORIGIN	PRODUCT CODE - DESCRIPTION OF GOODS MID      PGA QTY / UOM      PACKAGING	HS NUMBER HS QTY / UOM	UNIT QTY	UNIT PRICE	TOTAL
CA * (XQ)	G33-Test Product 1 45-78925      340/KG      340/CS	4409.29.2660 12/FT	880 M2	3.79	3335.20
CA * (XQ)	G34-Test Product 2 88-54723      558/KG      12/CS	4409.29.2660 15/CS	760 M2	3.99	3032.40
Additional information added in the Comments section					

INVOICE TOTAL TOTAL DE LA FACTURE	<b>6367.60 USD</b>
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ABOVE PRICES INCLUDE LES PRIX CI-DESSUS COMPRENNENT	<input checked="" type="checkbox"/> DUTY DROITS	<input checked="" type="checkbox"/> BROKERAGE COURTAGÉ	<input checked="" type="checkbox"/> FREIGHT TRANSPORT	<b>235</b>	<input checked="" type="checkbox"/> DISCOUNT REMISE	<b>34.00</b>	<input type="checkbox"/> % <input checked="" type="checkbox"/> \$
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To the best of the knowledge and belief of the preparer this invoice is true and complete and discloses the true prices, values, quantities, rebates, drawbacks, fees, commissions, royalties and any goods or services provided to the seller either free or at a reduced cost	NAME OF RESPONSIBLE EMPLOYEE OF EXPORTER/ PREPARER NOM DE L'EMPLOYÉ RESPONSABLE CHEZ L'EXPORTATEUR / PRÉPARATEUR <b>Denis Anderson</b>
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