

Pro Forma Invoice

Sender :	
Compagny Name	: _____
Contact Person	: _____
Street	: _____
Zip Code / City	: _____
Country	: _____
Telephone-nr.	: _____
VAT-nr.	: _____

Receiver :	
Compagny Name	: Eurofins Analytico
Contact Person	: Mohamed Achahbar / Samplereception
Street	: Gildeweg 42
Zip Code / City	: 3771 NB Barneveld
Country	: The Netherlands
Telephone-nr.	: 0031 342 426208
Fax-nr.	: 0031 342-426396
VAT-nr.	: NL 8043.14.883B01

Courier : _____

Airwaybill-nr. : _____

Country of Orgin : _____

Reason for export : Dispatch to specialised laboratory. NOT FOR SALE.

Incoterms : DDU

Contents :			
Decription of the goods	Quantity	Unit Value	Sub Value
Total value for customs			
			Currency

Value for custom purpose only, no commercial value

I declare that the above mentioned is true and correct.

Date : _____

Signature and Stamp

Name : _____