



Corporate:
1010 Niagara Street,
Buffalo, NY 14213
(716) 884-1554

PRO FORMA INVOICE

BCB'S FILER CODE IS 186
All documents can be faxed to 716-884-5703 or emailed to
paps@bcb1.com.

Exporter Reference #:

Date (MM/DD/YYYY):

**FOR US CUSTOMS CLEARANCE,
NOTIFY ONLY BCB INTERNATIONAL**

This fax number and email account are both monitored 24/7.

Exporter/Shipper/Seller:

Foreign Point of Lading:

Point of Entry:

Final Destination (if not US):

Place PAPS sticker here or write PAPS number on
line below:

Consignee/Ship To:

Other (eg. Buyer/Bank) Third Party:

Comments:

IRS #:

IRS #:

DUNS:

DUNS:

Email:

Email:

Parties to the Transaction:

Estimated Freight Charges to
Point of Exit:

Carrier Name:

USMCA Certificate of Origin:

Responsible for Brokerage & Duty Charges:

Freight Included:

No. and Kind of Packages:

Currency of Sale:

Brokerage & Duty Fees Included:

Terms of Sale:

Gross Metric Weight:

C/O	Description	Claim USMCA	Tariff No.	Invoice Item Qty.	Invoice Unit Price	Invoice Total
						Total Invoice:

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

Date: _____ Signature (Responsible Party): _____ Title: [] **Owner** [] **Agent**

Firm Name & Address (if different than above):