INVOICE PROFORMA

SHIPPER :

Name _____

Address _____ **Invoice Number:**

City _____ _____

CAP _____

Country _____

Phone _____ **Invoice Date :**

Tax number _____ _____

SHIP TO :

Name _____

Address _____

City _____

CAP _____

Country _____

Phone _____

N° Units	**Full Description of Goods Harmonized System Tariff Number If Known**	**Country of Origin**	**Unit Value on $**	**Total Value on $**

Number of package _____

Total Value $ _____

(The values indicates are in US DOLLARS)

I declare that the video film imported contains no obscene or immoral matter, nor any matter advocating og urging treason or insurrection against the U.S.A., nor any threat to take the life or inflict bodily harm upon any person in the U.S.A.

Signature _____