

Bay Brokerage Inc.

P.O. Box 293

County Rte. 191

Wellesley Island, New York 13640

U.S. CUSTOMS PRO-FORMA INVOICE

PAGE NUMBER

1 OF

1 EXPORTER, SHIPPER, SELLER (COMPLETE NAME AND ADDRESS)

NAME: Empire Forest Products Ltd.

ADDRESS: 3311 Aberdeen Avenue
Burlington, ON, L7M 3Y3

PHONE: 905-332-9570

U.S. CUSTOMS

CLEARANCE BY: Bay Brokerage Inc.

2 EXPORT REFERENCE NUMBER

3 CONSIGNEE (SHIP TO) (COMPLETE NAME AND ADDRESS)

NAME: Ornamental Mouldings LLC

ADDRESS: 3804 comanche Road, Archdale, North Carolina, 27263

PHONE: 336-431-9170

5 Place of Lading (City / Province / Country)

Burlington, ON

6 Destination (City / State / Country)

Archdale, North Carolina, U.S.A

8 Country of Origin

Canada

9 U.S. Port of Entry

Alexandria Bay, N.Y.

FEDERAL ID/SS # 56-2369490

11 Invoice Date

12 Date of Sale

14 Exchange Rate

15 Currency of Sale

U.S.D.

40

41

4 BUYER (SOLD TO) COMPLETE NAME AND

ADDRESS IF DIFFERENT FROM BLOCK 3)

(SOLD TO) PARTIES IN THIS TRANSACTION ARE

☐ NOT RELATED

☐ RELATED

NAME:

ADDRESS:

PHONE:

17 Gross Weight and Cubage (Metric)

38m3

10 Pre-carriage by

Invoice No.

13 Exporting Carrier

Truck No.

16 Freight Rate

Route

7 Terms of Sale - Delivery - Payment

F.O.B: ☐ PLANT or ☐ DESTINATION or

Prices Shown in Column 21 Include:

☐ U.S. BROKERAGE

☐ U.S. DUTY / MPF

☐ FREIGHT

Other (Specify)

U.S. Duty and / or Brokerage Charge for:

☐ Shipper

☐ Consignee

or for the Account of

18 Invoice Item Description (To include marks, numbers & kinds of packages)

U.S. Customs requires weights and measures in metric.

BORDER: ALEXANDRIA BAY-NY
FEB. 15th 2021 13h pm.

XQ1: Aspen Tariff # 4407970079

Weight = 38m3

76,000 LBS

19 Invoice
Unit Quantity

13 bundles

20 Invoice
Unit Price

21 Invoice Total

\$ 15,062.85

DG EXPRESS
NTZS017373 2

FILER CODE
BEK



S.L. & C. SEAL NOS.

22 If goods are not sold, state reason for export.

23 Export Permit No.

31
Packaging

24 Estimated freight charges

To Point of Exit \$

Or to destination \$

25 Mode of Transportation from point of exit

☒ Road ☐ Rail ☐ Water ☐ Air ☐ Other

26 Containerized

☒ Yes ☐ No

Total No. Pcs. / Pkgs.

Dimen. Of Shipment

Total Cubic Feet

Dimensional Weight

Number / Pieces

I hereby certify that the information given above is true and complete in every respect

27 Give firm name and address if different from exporter box above.

28 Date

30 Status

☐ Owner ☐ Agent

Agent.

Shipper:

29 Signature

Signature

32
Ocean or
International
Freight

33 Domestic
Freight
Charges

34 Insurance

35 Misc. Trans.

36 Commission

37 Container

38 Assists

39
Invoice Total