Bay Brokerage Inc.

P.O. Box 293													
County Rte. 191 U.S. CUSTOMS PRO-FORMA INVOICE										PAGE NUMBER			
Wellesley Island, New York 13640												1 OF	
1 EXPORTER, SHIPPER, SELLER (COMPLETE NAME AND ADDRESS)							U.S. CUSTOMS						
NAME:							CLEARANCE BY: Bay Brokerage Inc.						
ADDRESS:							2 EXPORT REFERENCE NUMBER						
PHONE: 3 CONSIGNEE (SHIP TO) (COMPLETE NAME AND ADDRESS)							5 Place of Lading (City / Province / Country)						
NAME:								6 Destination (City / State / Country)					
ADDRESS:							(2.37, 2.22., 2.22,)						
PHONE:							8 Country of Origin				9 U.S. Port of Entry		
11 Invoice Date	ı			15 Currency of Sale			40				41		
4 BUYER (SOLD TO) COMPLETE NAM	E AND	(SOLD TO) P	ARTIES IN THIS	TRANSA	CTION A	RE:		17 Gross \	Neight and	Cubage	(Metric)	
ADDRESS IF DIFFERENT FROM BLOCK 3) NOT RELATED RELA							ED 10 Pre- carria			arriage by	riage by Invoice No.		
NAME: Keystone Automotive Operations Inc.													
ADDRESS: 44 Tunkhannock Ave Exeter, PA 18643							13 Exporti			ing Carrier		Truck No.	
PHONE: 1-800-272-4247							16 Freight Ra			nt Rate		Route	
7 Terms of Sale - Delivery - Payment								U.S. Duty and / or Br			okerage (L	
F.O.B: PLANT or DESTINATION or									Shipper			Consignee	
Prices Shown in	Column 21 Include												
U.S. BROKERAGE U.S. DUTY / MPF FREIGHT									or for the A	Account of			
Other (Specify	•	arke numbere	2 kinds of no	okagos)			19 li	nvoice	20 In	voice	21	Invoice Total	
18 Invoice Item Description (To include marks, numbers & kinds of packages)U.S. Customs requires weights and measures in metric.							19 Invoice 20 Invoice Unit Quantity Unit Price				21	mvoice rotai	
2.2. 2.2							01.11.	audy	0				
S.L. & C. SEAL NOS.													
22 If goods are not sold	d, state reason for e	export.			23 Ex	oort Perm	it No.			31	1		
										Packaging			
24 Estimated freight charges							32			32			
To Point of Exit \$ Or to destination \$										Ocean or			
25 Mode of Transporta	tion from point of ex	dt			26 Co	ntainerize	ed			Internation	al		
Road	Rail W	/ater	Air	Other			Yes		No	Freight			
Total No. Pcs. / Pkgs. Dimen. Of Shipment Total Cubic Feet Dimensional Weight						eight				33 Domes	stic		
								Freight					
I hereby certify that the information given above is true and complete in every respect										Charges			
27 Give firm name and address if different from exporter box above. 28 Date 30 Status										34 Insurance 35 Misc. Trans			
30 Status							Owner		Agent 36 Cor				
-							1	1	3	37 Contai			
Agent: Shipper:										38 Assists			
29 Signature Signature										39			
		-	-	_						Invoice Tot	al		