



RUTHERFORD GLOBAL LOGISTICS

TORONTO • MISSISSAUGA • NEWMARKET • HAMILTON • SARNIA
NIAGARA FALLS • FORT ERIE • WINDSOR • CALGARY • COUTTS
VANCOUVER • RICHMOND • PACIFIC HIGHWAY • MONTREAL • LACOLLE

Export Proforma

1 Exporter: _____

INSTRUCTIONS: Please complete and fax to:

Toronto: 905-673-2656

Vancouver: 604-273-8610

Montreal: 514-636-2294

Sold To: _____

Ship To: _____

IRS No.: _____

IRS No.: _____

2 Reason for Shipment: ☐ Sold ☐ For Repairs ☐ Not According To Order ☐ For Processing
☐ Other: _____

3 Shipment Information: Carrier pick/up to be arranged by: ☐ Rutherford ☐ Exporter/Shipper ☐ Consignee
No. of Pcs: _____ Weight: _____ ☐ lbs. ☐ kgs. Dimensions: _____

4 Description of Goods: ☐ as attached ☐ as listed below

Qty	Description - Include serial numbers and HS No. (if known)	Country of Origin	Unit Price	Total Price	Currency

5 Import Information: Good were imported on a: ☐ Duty paid B3 ☐ E29B ☐ 1/60th ☐ Unknown
Import Entry Number: _____ Date: _____
Drawback or Refund Claim Required: ☐ Yes ☐ No

6 Export Freight Information: Ship via: ☐ Air ☐ Courier ☐ Truck ☐ Rail ☐ Ocean ☐ Other: _____
Shipping to be arranged by: ☐ Rutherford ☐ Exporter ☐ Consignee
Ship: ☐ Direct ☐ Call for Special Instructions Goods must arrive by: _____

7 U.S. Customs Clearance Information: U.S. Customs Clearance to be arranged by: ☐ Rutherford ☐ Exporter ☐ Consignee
Name of Exporter or Consignee U.S. Customs Broker: _____
U.S. Customs Temporary Import Bond (TIB) required: ☐ Yes ☐ No
NAFTA Certificate of Origin: ☐ Attached ☐ Blanket on File ☐ Not required - foreign goods

US Continuous Bond No. _____

8 Export Charges Information: Freight Charges: ☐ Prepaid Exporter ☐ Collect to Consignee
U.S. Customs Charges: ☐ Prepaid Exporter ☐ Collect to Consignee
Canadian Export Charges: ☐ Prepaid Exporter ☐ Collect to Consignee

9 Insurance Information: Insurance Required: ☐ Yes ☐ No Amount: \$ _____ ☐ CAD ☐ USD
(Note: usual carrier insurance is approx. \$2.00 CAD/lb. UPS maximum insurance is \$100.00 CAD)

10 Exporter Contact Information: Exporter Contact Person (please print name): _____
Phone No.: _____ Fax No.: _____
Date: _____ Signature: _____