



Hebei Longheng Medical Equipment Co.,Ltd

Proforma Invoice

PI No: LHY20260808-011

Buyer:	To:	Hoxs n	Seller:	Company Name:	Hebei Longheng Medical Equipment Co.,Ltd
	Address:			Address:	No. 1069, Jinji South Street, Jizhou District, Hengshui City, Hebei Province
	Tel:			Tel:	18330251121
	E-mail Address:			E-mail:	amber@hblhmed.com

The undersigned sellers and buyers have agreed to close the following transactions according to the terms and conditions stipulated below:

S/N	Picture	Description	CBM	QTY	Unit Price (USD)	Total Price (USD)
1		SS304 material TPR material double- sided wheel with brake 600*400*850/1250	Total 2.1 CBM	25	249.30	6232.50
FREIGHT:						0.00
Sub Total:						6232.50

- ※ Trade Terms:EXW
- ※ Packing: Standard export carton
- ※ Production period:20-25
- ※ Time of Shipment: The goods will be shipped after full payment is received.

Beneficiary Name Hebei Longheng Medical Equipment Co., Ltd.
Beneficiary account number 3974000026348
Country/Region HongKong
Swift Code CITIHKHX or CITIHKHXXX
Beneficiary Address 20/F, TOWER ONE, TIMES SQUARE, 1 MATHESON STREET, CAUSEWAY BAY, HONG KONG
Beneficiary Bank CITIBANK N.A.HONG KONG BRANCH 
Beneficiary Bank Address Champion Tower THREE Garden ROAD CENTRAL, HONG KONG
Bank Code 006
Branch Code 391

Supported Currencies:

 USD  EUR  AUD  GBP  CAD  HKD  JPY  SGD
 CNY