

CHEMICAL INVENTORY INVOICE

[Organization Name]
[Laboratory/Facility Division]
[License Number/EPA ID]

Invoice Number: _____

Reference Date: _____

PO Number: _____

Billing Entity:

Delivery/Storage Location:

Building/Room: _____

CAS NUMBER / SKU	CHEMICAL DESCRIPTION & GRADE	UN CLASS	CONTAINER SIZE	QTY	UNIT PRICE	TOTAL
_____	_____ Purity: _____	_____	_____	_____	_____	_____
_____	_____ Purity: _____	_____	_____	_____	_____	_____

CAS NUMBER / SKU	CHEMICAL DESCRIPTION & GRADE	UN CLASS	CONTAINER SIZE	QTY	UNIT PRICE	TOTAL
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_____	Purity: _____	_____	_____	_____	_____	_____
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Subtotal: \$ _____

Hazmat Handling Fee: \$ _____

Disposal Surcharge: \$ _____

Total Amount (USD): \$ _____

Compliance Notice: This inventory transfer complies with OSHA Hazard Communication Standard (29 CFR 1910.1200). SDS documentation is attached for all listed substances. Proper PPE must be utilized during unboxing and storage according to specified UN Hazard Classes.