CLOUD_INFRA_SYS

Enterprise Storage Division

INVOICE

#INV-000000

Provider:

Cloud Storage Solutions Inc.
101 Data Center Blvd
Silicon Valley, CA 94025

Bill To:

[Customer Name / Company]
[Billing Address Line 1]
[Billing Address Line 2]

Invoice Date: [MM/DD/YYYY]
Billing Period: [Start Date] - [End Date]
Due Date: [MM/DD/YYYY]
Payment Method: [Credit Card / Wire]

SERVICE DESCRIPTION	REGION	USAGE / QTY	RATE	AMOUNT
Object Storage (S3 Compatible) Standard Tier - High Availability	US-East-1	[0.00] TB	$0.00 /TB	$0.00
Block Storage (SSD) Provisioned IOPS	EU-West-1	[0.00] GB	$0.00 /GB	$0.00

SERVICE DESCRIPTION	REGION	USAGE / QTY	RATE	AMOUNT
Data Egress Outbound Internet Traffic	Global	[0.00] GB	$0.00 /GB	$0.00
Archive Vault Cold Storage / Long-term Retention	US-West-2	[0.00] TB	$0.00 /TB	$0.00

Subtotal: $0.00
Tax (0%): $0.00

Total Due: $0.00 USD

Notes: Service is billed monthly in arrears based on actual consumption. Late payments may incur a 1.5% monthly fee.

For support regarding this invoice, please contact billing@example.com