# INVOICE

[Company Name]
[Address]
[City, State, Zip]
[Phone/Email]

**Invoice #:** _____

**Date:** _____

**PO #:** _____

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**Bill To:**

[Client Name]
[Client Address]
[Client Contact Email]

**Pickup Location:**

[Site Address]
[Site Contact Name]

| E-Waste Category / Description | Qty / Weight | Unit Price | Total |
|---|---|---|---|
| Computers (CPUs/Laptops) | | | |
| Monitors (LCD/CRT) | | | |
| Peripherals (Printers/Keyboards) | | | |
| Server Equipment | | | |

| E-Waste Category / Description | Qty / Weight | Unit Price | Total |
|---|---|---|---|
| Data Destruction Services | | | |
| Pickup / Logistics Fee | | | |

Subtotal: $0.00
Tax: $0.00

**Total: $0.00**

**Terms:** Net [30] Days. Please make checks payable to [Company Name].

**Certification:** All items listed above will be recycled or disposed of in accordance with local, state, and federal environmental regulations. A Certificate of Destruction will be provided upon request.