Electronic Waste Disposal Manifest Manifest Number Date Generator (Company/Organization Name) Contact Person Phone Number Address Transporter Name Transporter Signature Transporter Phone Transporter Address Disposal Facility Name Facility Address Facility Phone Items for Disposal

Item Description	Quantity	Serial Number (if any)	Weight (kg)	Remarks
otal Weight (kg)				
o tall 11 o light (rig)				
Special Instructions				
Generator Signature & Da	ate			
Facility Representative Si	ignature & Date			