

Standard Expense Invoice

Vendor Name
ABC Supplies Co.

Vendor Address
123 Main St, Suite 400
Cityville, State 12345

Vendor Contact
contact@abcsupplies.com
(555) 123-4567

Invoice Number
EXP-2024-045

Invoice Date
2024-06-18

Due Date
2024-07-02

Bill To
XYZ Corporation

Billing Address
987 Elm Ave
Business Park, State 67890

Contact
ap@xyzcorp.com

Expense Details

#	Description	Date	Category	Quantity	Unit Cost	Amount
1	Office Stationery	2024-06-15	Supplies	10	25.00	250.00
2	Travel Expense - Taxi	2024-06-16	Transportation	1	50.00	50.00
3	Client Lunch Meeting	2024-06-17	Meals & Entertainment	1	85.00	85.00

Subtotal:

385.00

Tax (5%):

19.25

Total Amount:

404.25

Important Notes:

- Submit all supporting receipts and documents along with the invoice.
- Ensure invoice information matches corresponding purchase orders or contracts.
- Discrepancies may delay payment processing.
- Contact the billing department for any clarifications before submission.
- Keep a copy of this invoice for your records.