

ABC Company Ltd.

123 Business Park Avenue

City, State ZIP

Phone: (123) 456-7890

Email: contact@abccompany.com

Invoice #: INV-2024-037

Date: 2024-06-20

Sample Invoice for Airfare Reimbursement Submission

Employee Information

Name: John Doe

Department: Marketing

Employee ID: 004235

Email: john.doe@email.com

Phone: (555) 555-1234

Travel & Airfare Details

Date	Route	Flight Number	Ticket No	Class	Amount (USD)
2024-06-10	New York → Chicago	UA1234	546789002133	Economy	220.00
2024-06-15	Chicago → New York	UA1235	546789002135	Economy	210.00
					Total 430.00

Payment Information

Mode of Payment: Personal Credit Card

Payee Name: John Doe

Bank Account #: 9876543210

Bank Name: National Bank

IFSC/Swift Code: NB000456

Supporting Documents

- Original Airfare Invoice(s)
- Copy of Flight E-ticket(s)
- Boarding Passes (if available)
- Proof of Payment

Important Notes

- Ensure that all airfare invoices and tickets are issued in the employee's name and match the claimed route and dates.
- All reimbursement claims must be accompanied by supporting documents including proof of payment and boarding passes.
- Airfare should be in accordance with the company's travel policy on class and fare type.
- Submit your airline invoice within 30 days of travel for timely processing.
- Duplicate or previously reimbursed claims will not be processed.