

TRAVEL INVOICE

[Consultant Name]
[Address Line 1]
[City, Country, Postcode]
[Email / Phone]

Invoice #: [0000]
Date: [DD/MM/YYYY]
Project/Ref: [Project Name]

Bill To:

[Client Name / Organization]
[Department/Contact Person]
[Address]
[Country]

Date	Description (Origin - Destination / Purpose)	Category	Currency	Amount
[DD/MM/YY]	[Flight: City to City]	Airfare	[USD]	[0.00]
[DD/MM/YY]	[Hotel: X Nights]	Lodging	[USD]	[0.00]
[DD/MM/YY]	[Daily Subsistence Allowance / Per Diem]	Meals	[USD]	[0.00]
[DD/MM/YY]	[Taxi/Train to Airport]	Transport	[USD]	[0.00]

Subtotal: [0.00]
Tax/VAT ([0] %): [0.00]

Total Amount Due: [Currency] [0.00]

Payment Instructions (International Wire)

Bank Name: [Bank Name]

SWIFT/BIC: [Code]

IBAN/Account #: [Number]

Beneficiary Name: [Name]

** Please attach all original receipts to this invoice for reimbursement.*