

Invoice for Charity Trip-Related Expenses

Date: [Insert Date]

Invoice Number: [Insert Invoice Number]

From:

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

To:

[Recipient Name]
[Charity Organization Name]
[Organization Address]
[City, State, Zip Code]

Description of Expenses

Date	Description	Amount
[Insert Date]	[Description of Expense]	[Amount]
[Insert Date]	[Description of Expense]	[Amount]

Total Amount Due:

[\$[Total Amount]]

Payment Instructions:

Please make the payment by [Insert Payment Due Date].

Thank you for supporting our charity trip!

[Your Name]

[Your Position, if applicable]