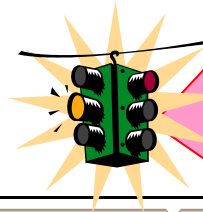


# MINIMUM ENTRIES NEEDED TO SAVE

## Only Invoice Information Tab Needed



**REMEMBER: THIS WILL SHUTDOWN AFTER 20 MIN OF NO ACTIVITY!**

### ● 1 – Vendor & Invoice Section:

**Vendor Info**

Vendor: 0000001568  
 Name: XEROXCORP-001  
 Location: V  
 \*Address: 14  
 XEROX CORP  
 1301 Ridgeway Ms 380-179  
 Lewisville, TX 75057-6009

**Invoice**

Invoice No: [ ]  
 Invoice Date: [ ]  
 \*Pay Terms: Net 30  
 Misc Amt: [ ]  
 Frght Amt: [ ]  
 Sales Tax: [ ]  
 SUT Exempt  Use Tax:   
 VAT: [ ]  
 Total: 0.00

Acctg Date: 08/06/2004  
 Pay Schedule: Other

Invoice Number  
 Dates  
 Invoice Amt

### ● 2 – Invoice Lines Section:

SpeedChart

OR

Item	Description	Quantity	UOM	Unit Price	Extended Amt
1	SUT/VAT/Intrastat				0.00

### ● 3 – Distribution Lines Section:

Account  
 Department ID  
 Project  
 Fund  
 Program  
 Bud Ref  
 Cost Center

### ● 4 – Click Save (at bottom left of screen) so you do not lose any work you've already done !!

**(🔔 DON'T FORGET TO WRITE DOWN VOUCHER NUMBER)**

### ● 5 – Please read all warnings and windows that may appear.

➤➤➤ NOW YOU CAN  THIS VOUCHER AS OFTEN AS YOU WANT/NEED. ⏪⏪⏪