

JANITORIAL CONTRACT AND SUPPLY EXPENSE SHEET

Facility/Location:
Billing Period:
Department:
Date Prepared:

1. CONTRACTED JANITORIAL SERVICES

Service Provider / Vendor Name	Description of Service	Frequency	Contract Cost

2. CLEANING & JANITORIAL SUPPLIES

Item Description	Supplier / Brand	Quantity	Unit Cost	Total Cost

3. ADDITIONAL / AD-HOC SERVICES

Service Description (e.g., Carpet Clean, Window Wash)	Provider	Service Date	Cost

Contract Services Total	
Supplies Total	

Additional Services Total	
--------------------------------------	--

Grand Total	
--------------------	--

Prepared By (Signature & Date)

Approved By (Signature & Date)