INVOICE

[Company Name]
[Street Address]
[City, State, Zip]
[Phone/Email]

Invoice #: _____

Date: _____

Event Date: _____

CLIENT:

[Client Name]
[Organization]
[Address]
[Phone]

EVENT DETAILS:

Venue: _____
Guest Count: _____
Occasion: _____

Description (Catering & Staffing)	Quantity/Hours	Rate/Unit Price	Total
Catering: [Menu Package Name]			
Beverage Service: [Package Details]			
Staff: Event Manager			

Description (Catering & Staffing)	Quantity/Hours	Rate/Unit Price	Total
Staff: Servers/Waitstaff			
Staff: Bartenders			
Rentals: [Linens, China, Glassware]			
Delivery & Setup Fee			

Subtotal: $_____
Service Charge (%): $_____
Sales Tax: $_____

Grand Total: $_____
Deposit Paid: ($_____)
Balance Due: $_____

Payment Terms: Please make checks payable to [Company Name]. Balance due within [Number] days of event.

Notes: [Special instructions or dietary restrictions notes]