

INVOICE

[Business Name]
[Street Address]
[City, State, Zip]

Invoice #: [00000]
Date: [Date]
Due Date: [Date]

Client:

[Client Name]
[Event Title]
[Client Address]

Event Details:

Date: [Event Date]
Location: [Venue Name]

DESCRIPTION OF SERVICES	QUANTITY / HOURS	RATE	AMOUNT
Venue Coordination & Management	-	-	\$0.00
Vendor Procurement & Liaison	-	-	\$0.00
On-site Event Supervision	-	-	\$0.00
Event Design & Decor Consultation	-	-	\$0.00

Subtotal: \$0.00

Tax: \$0.00

Total Amount: \$0.00

Please make checks payable to [Business Name].

Thank you for your business.