

INVOICE

[Your Event Planning Company Name]
[123 Business Street]
[City, State, Zip Code]
[Phone Number] | [Email Address]

Invoice #: [00001]
Date: [MM/DD/YYYY]
Due Date: [MM/DD/YYYY]

Client Info:

[Client Name]
[Client Company]
[Client Address]
[City, State, Zip Code]

Event Details:

Event: [Event Name/Type]
Date: [Event Date]
Venue: [Venue Name]

Description of Services	Quantity/Hrs	Rate	Amount
Event Coordination & Planning Fee	[0]	\$0.00	\$0.00
Venue Liaison & Management	[0]	\$0.00	\$0.00

Description of Services	Quantity/Hrs	Rate	Amount
Vendor Procurement (Catering, Decor, AV)	[0]	\$0.00	\$0.00
On-site Staffing (Day-of)	[0]	\$0.00	\$0.00
Travel & Miscellaneous Expenses	[0]	\$0.00	\$0.00

Subtotal: \$0.00
Tax ([0] %): \$0.00
Deposit Paid: (\$0.00)

Total Due: \$0.00

Payment Instructions:

Please make checks payable to [Company Name]. For wire transfers or credit card payments, please contact our billing department.

Thank you for your business! We look forward to a successful event.