

WEDDING PLANNER

[Your Business Name]
[Address Line 1]
[Email / Phone]

Invoice #: _____
Date: _____
Wedding Date: _____

BILLED TO

[Client Names]
[Client Address]
[Client Phone]

EVENT DETAILS

[Venue Name]
[Location]
[Number of Guests]

Service Description	Rate/Price	Qty	Total
Full Wedding Coordination / Package Fee	\$		\$
Vendor Liaison & Management	\$		\$
Rehearsal Dinner Coordination	\$		\$
Additional Consultation Hours	\$		\$

Subtotal \$ _____
Tax \$ _____
Deposit Paid (\$ _____)

Balance Due \$ _____

Payment Instructions:

Please make checks payable to [Business Name] or pay via [Payment Method].
Balance is due [Number] days prior to the wedding date.

Thank you for letting us be part of your special day!