

# [CATERING COMPANY NAME]

[Street Address]  
[City, State, Zip]  
[Phone Number]  
[Email/Website]

## INVOICE

# [0000]  
Date: [Date]  
Due Date: [Date]

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### CLIENT / BILL TO:

[Client Name]  
[Company Name]  
[Address]  
[Phone]

### EVENT DETAILS:

Event Date: [Date]  
Event Type: [e.g., Wedding, Corporate]  
Guest Count: [00]  
Location: [Venue Name]

DESCRIPTION OF SERVICE / MENU ITEM	QTY/HRS	RATE	AMOUNT
[Menu Item / Service Name]			\$0.00
[Menu Item / Service Name]			\$0.00

DESCRIPTION OF SERVICE / MENU ITEM	QTY/HRS	RATE	AMOUNT
Staffing / Labor Fees			\$0.00
Equipment Rentals (Linens, China, etc.)			\$0.00
<b>Subtotal: \$0.00</b>			
Service Charge ([%]): \$0.00			
Sales Tax ([%]): \$0.00			
<b>Total Due: \$0.00</b>			

**Payment Instructions:**

Please make checks payable to [Company Name]. For bank transfers or credit card payments, please contact [Contact Name].

**Terms:** A deposit of [X%] was required to secure the date. Final payment is due [X] days prior to the event.