

INVOICE

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

Invoice #: [000]
Date: [Date]
Due Date: [Date]

Client Information:

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

Event Details:

Wedding Date: [Date]
Venue: [Venue Name]

Description	Price
Partial Wedding Coordination Package - Vendor management & final confirmations - Detailed wedding day timeline creation - Rehearsal coordination (up to 2 hours) - On-site coordination (up to 10 hours)	[\$0.00]
Additional Services / Travel Fees	[\$0.00]

Subtotal: [\$0.00]

Tax: [\$0.00]

Total Amount Due: \$[0.00]

Payment Instructions:

Please make checks payable to [Company Name] or pay via [Payment Link/Method].

Thank you for choosing us to be a part of your special day!