DEPOSIT INVOICE

[Catering Company Name]
[Address Line 1]
[City, State, Zip]

Invoice #: _____
Date: _____
Due Date: _____

CLIENT INFORMATION

[Client Name]
[Phone Number]
[Email Address]

EVENT DETAILS

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

Description	Estimated Guest Count	Total Quote
Premium Banquet Catering Services Includes menu selection, staffing, and equipment rental.	_____	$ _____

Total Estimated Amount: $ _____
Deposit Required (____%): $ _____

Total Amount Due Now: $ _____

Terms & Conditions: This deposit is required to secure the event date and is [Refundable/Non-refundable] as per the signed catering agreement. Final guest count and balance payment are due [Number] days prior to the event.

Thank you for choosing [Catering Company Name]