INVOICE

#INV-0000

Linen Rental Co.

123 Business Way
City, State, Zip

BILL TO:

[Client Name / Company]
[Address]
[Email / Phone]

EVENT DETAILS:

Event Date: [Date]
Venue: [Venue Name]
PO Number: [00000]

DESCRIPTION	COLOR/SIZE	QTY	UNIT PRICE	TOTAL
Tablecloths (Polyester/Linen)	[Size/Color]	[0]	$0.00	$0.00
Napkins	[Size/Color]	[0]	$0.00	$0.00
Table Runners	[Size/Color]	[0]	$0.00	$0.00
Chair Covers / Ties	[Size/Color]	[0]	$0.00	$0.00

Subtotal: $0.00
Service/Laundry Fee: $0.00
Tax: $0.00
GRAND TOTAL: $0.00

Notes: All rentals must be returned in the provided bins. Missing or damaged items will be billed at full replacement cost. Payment due within 30 days.