

TAX INVOICE

[Your Business Name]
[Business Number / Tax ID]

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

BILL TO:

[Client Name]
[Client Address]
[Event Name/Date]
Invoice #: [0000]
Date: [Date]
Due Date: [Date]

Description of Services	Qty/Hrs	Rate	Amount
Event Planning & Coordination Fees	-	-	[0.00]
Venue Management & Decor Setup	-	-	[0.00]
Vendor Procurement (Catering, Music, etc.)	-	-	[0.00]
Additional Expenses / Rentals	-	-	[0.00]

Subtotal: \$[0.00]
Tax ([0] %): \$[0.00]
Total: \$[0.00]

Payment Terms: [e.g., Net 30]

Bank Details: [Bank Name] | **Account:** [Number] | **Routing:** [Number]

Thank you for choosing [Your Business Name] for your event!