

# TAX INVOICE

**[Catering Company Name]**  
[Street Address]  
[City, State, Zip]  
[Tax ID / EIN]

**Invoice #:** [00000]  
**Date:** [MM/DD/YYYY]  
**Event Date:** [MM/DD/YYYY]

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**BILL TO:**

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

**EVENT DETAILS:**

[Event Type / Name]  
[Venue Name]  
[Guest Count: 00]

DESCRIPTION	QTY/UNIT	RATE	AMOUNT
[Menu Package/Food Items Description]	[0]	\$0.00	\$0.00
[Beverage Service]	[0]	\$0.00	\$0.00
[Staffing / Labor Fees]	[0]	\$0.00	\$0.00

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DESCRIPTION	QTY/UNIT	RATE	AMOUNT
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[Equipment Rentals / Linens]	[0]	\$0.00	\$0.00
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Subtotal: \$0.00

Service Charge ([0] %): \$0.00

Tax ([0] %): \$0.00

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**TOTAL: \$0.00**

**Payment Terms:** [Net 30 / Due on Receipt]

**Payment Method:** [Bank Transfer / Check / Credit Card details]

*Thank you for your business.*