

# PROFORMA INVOICE

[Venue Name]  
[Street Address]  
[City, State, Zip]  
[Email/Phone]

**Date:** \_\_\_\_\_  
**Invoice #:** \_\_\_\_\_  
**Event Date:** \_\_\_\_\_

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**Client / Billed To:**

[Name/Company]  
[Address]  
[Phone]

**Event Details:**

Type: [Event Type]  
Guests: [Count]  
Venue: [Room/Hall Name]

Description	Quantity/Hours	Unit Price	Total
Venue Hire Fee			
Catering Services			
Equipment & AV Rental			
Staffing / Security			

Description	Quantity/Hours	Unit Price	Total
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Other: \_\_\_\_\_

Subtotal: \_\_\_\_\_

Tax / VAT: \_\_\_\_\_

**Grand Total:** \_\_\_\_\_

Deposit Required: \_\_\_\_\_

**Payment Terms:** This is a proforma invoice based on current event requirements. Final invoice will be issued after the event. Please pay the deposit by [Date] to secure the booking.

**Bank Details:** [Bank Name] | **Account:** [Number] | **Sort Code:** [Code]