

PROFORMA INVOICE

Workshop Planning & Coordination

Date: _____

Invoice #: _____

Provider Details:

Bill To:

Workshop Details:

Title: _____

Date(s): _____ Location: _____

Description of Services / Planning Items	Quantity	Unit Price	Total
Venue Coordination & Booking			
Facilitation Fees			
Materials & Stationery			
Catering Management			
Travel & Logistics			

Subtotal: _____

Tax/VAT: _____

Grand Total: _____

Payment Terms & Instructions:

This is a Proforma Invoice for planning purposes only. A tax invoice will be issued upon final confirmation.