

PROFORMA INVOICE

[Catering Company Name]
[Street Address]
[City, State, Zip]
[Phone] | [Email]

Invoice #: _____
Date: _____
Valid Until: _____

CLIENT / BILL TO:

[Client Name]
[Company Name]
[Billing Address]
[Contact Phone]

EVENT LOGISTICS:

Event Date: _____
Venue: _____
Guest Count: _____
Service Type: _____

Description	Quantity/Units	Unit Price	Total
Food & Beverage Services			
Service Staff & Labor			
Equipment Rental (Linens, China, Glassware)			
Logistics, Delivery & Setup			

Description	Quantity/Units	Unit Price	Total
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Venue/Admin Fees

Subtotal: \$ _____

Sales Tax: \$ _____

Service Charge (Gratuity): \$ _____

TOTAL AMOUNT: \$ _____

Payment Terms & Notes:

- Deposit of []% required to confirm booking.
- Balance due [] days prior to event date.
- This is a proforma invoice based on current logistics estimates.

Authorized Signature: _____ Date: _____

Thank you for your business!