DEPOSIT INVOICE

[Catering Company Name]
[Address Line 1]
[Phone Number]

Invoice #: [0000]
Date: [Date]
Due Date: [Date]

BILL TO:

[Client Name]
[Client Address]
[Client Phone]

EVENT DETAILS:

Event Date: [Date]
Venue: [Venue Name]
Guest Count: [00]

Description	Total Quote	Deposit %	Amount
Catering Services Deposit for [Event Name]	$0.00	0%	$0.00

Subtotal: $0.00
Tax: $0.00

Deposit Due Now: $0.00

PAYMENT INSTRUCTIONS

Please make checks payable to **[Catering Company Name]**.
For bank transfers: [Bank Name] | Account: [Number] | Routing: [Number]

Note: This deposit is non-refundable and secures your event date.