INVOICE

Caterer Name: _____

Address: _____

Email: _____

Date: _____

Invoice #: _____

Bill To:

Client Name: _____

Phone: _____

Event Details:

Birthday Person: _____

Event Date: _____

Guest Count: _____

Description (Food/Service)	Quantity	Unit Price	Total
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Description (Food/Service)	Quantity	Unit Price	Total
Service Fee / Staffing	_____	_____	_____

Subtotal: $_____
Tax: $_____
Grand Total: $_____
Deposit Paid: ($_____)

Balance Due: $_____

Notes / Terms:

Please make checks payable to _____. Payment is due by _____.

Thank you for choosing us for your birthday celebration!