INVOICE

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

Invoice #: [00000]
Date: [Date]
Due Date: [Date]

BILL TO:

[Client Name]
[Organization/Conference Name]
[Address]

EVENT DETAILS:

Venue: [Venue Name]
Event Date: [Date]
Guest Count: [000]

Description	Quantity/Units	Unit Price	Total
Morning Coffee & Refreshments	[Qty]	$0.00	$0.00
Buffet Lunch Service	[Qty]	$0.00	$0.00
Afternoon Tea & Snacks	[Qty]	$0.00	$0.00

Description	Quantity/Units	Unit Price	Total
Service Staff / Labor	[Hours]	$0.00	$0.00
Equipment Rental (Linens, Tableware)	[1]	$0.00	$0.00

Subtotal: $0.00
Service Charge ([%]): $0.00
Tax ([%]): $0.00

Amount Due: $0.00

Payment Instructions:
Please make checks payable to [Company Name].
For Bank Transfers: [Bank Name] | Account: [Number] | Routing: [Number]

Thank you for your business!