

INVOICE

No: _____
Date: _____

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

CLIENT DETAILS

[Client Name]
[Event Name/Type]
[Client Address]
[Email/Phone]
EVENT DETAILS

Date: [Event Date]
Venue: [Venue Name]
Guest Count: [Number]
Service Type: [Formal/Plated]

DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
Course I: [Appetizer Selection]			
Course II: [Entree Selection]			
Course III: [Dessert Selection]			
Beverage Service & Wine Pairing			

DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
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Professional Service Staff (Chef, Servers)

Equipment & Linens Rental

Subtotal: \$ _____
 Gratuity (____%): \$ _____
 Sales Tax: \$ _____
 Total Due: \$ _____

TERMS & NOTES

Payment is due within [Number] days. Please make checks payable to **[Catering Company Name]**. A deposit of [Amount] was required to secure the date. Thank you for your patronage.