GOURMET EVENTS CO.

INVOICE

BILLED TO

[Client Name]
[Client Address]
[City, State, Zip]

EVENT DETAILS

Invoice #: [0000]
Date: [Month DD, YYYY]
Event Date: [Month DD, YYYY]

SERVICE DESCRIPTION	QTY/GUEST	UNIT PRICE	AMOUNT
Catering Menu: [Menu Name/Selection]	0	$0.00	$0.00
Beverage Service & Bar Setup	0	$0.00	$0.00
Service Staff & Labor	0	$0.00	$0.00
Rentals (Linens, China, Glassware)	1	$0.00	$0.00

Subtotal $0.00
Service Charge (%) $0.00
Tax $0.00
Total Amount $0.00

PAYMENT INSTRUCTIONS

Please make checks payable to Gourmet Events Co. Payment is due within 15 days of event completion. Thank you for your business.