INVOICE

Rehearsal Dinner Catering

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

BILL TO

[Client Name]
[Client Address]
[Phone/Email]

Invoice #: [0000]
Date: [MM/DD/YYYY]
Event Date: [MM/DD/YYYY]
Guest Count: [00]

Description	Quantity	Unit Price	Total
[Menu Package Name/Description]	0	$0.00	$0.00
[Beverage Service]	0	$0.00	$0.00
[Staffing & Labor]	0	$0.00	$0.00
[Rentals: Linens, Glassware, etc.]	1	$0.00	$0.00

Subtotal: $0.00
Service Charge (%): $0.00
Sales Tax: $0.00

TOTAL: $0.00
Deposit Paid: ($0.00)
BALANCE DUE: $0.00

Notes & Payment Instructions:

[Enter payment terms, check mailing address, or electronic payment links here.]