

INVOICE

Catering Company Name
123 Business Road, Suite 100
City, State, Zip Code

Invoice #: [0000]
Date: [Date]
Event Date: [Date]

BILL TO:

[Client Names]
[Address Line 1]
[City, State, Zip]
[Phone/Email]

EVENT DETAILS:

Venue: [Venue Name]
Guest Count: [000]
Service Type: [Plated/Buffer]

Description	Quantity/Hrs	Unit Price	Total
Food Service (Per Guest Menu)	[Qty]	\$0.00	\$0.00
Beverage & Bar Package	[Qty]	\$0.00	\$0.00
Service Staff & Labor	[Qty]	\$0.00	\$0.00

Description	Quantity/Hrs	Unit Price	Total
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Rentals (Linens, China, Glassware)	[Qty]	\$0.00	\$0.00
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Subtotal: \$0.00

Service Fee ([%]): \$0.00

Sales Tax ([%]): \$0.00

Total Due: \$0.00

Deposit Paid: (\$0.00)

Payment Terms: Please make checks payable to [Company Name]. Balance is due [Number] days prior to the event date.

Thank you for letting us be a part of your special day!