

INVOICE

[Catering Company Name]
[Address Line 1]
[Phone Number]

Invoice #: _____
Date: _____
Event Date: _____

CLIENT / BILL TO:

[Contact Person]
[Company Name]
[Company Address]
[Email/Phone]

EVENT DETAILS:

Location: [Venue Name/Address]
Guest Count: [00]
Service Type: [Buffet/Plated/Drop-off]

MENU ITEM / SERVICE DESCRIPTION	QTY/GUEST	UNIT PRICE	TOTAL
[Appetizer Selection]			
[Main Entree Selection]			
[Side Dishes / Salads]			
[Beverage Service]			

MENU ITEM / SERVICE DESCRIPTION	QTY/GUEST	UNIT PRICE	TOTAL
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Service Staff / Labor

Equipment Rental / Linens

Delivery & Setup Fee

Subtotal:\$ _____
 Gratuity ([00]%):\$ _____
 Sales Tax:\$ _____
 Total Amount:\$ _____
 Deposit Paid:(\$ _____)
Balance Due:\$ _____

Notes: [Dietary restrictions, final headcount deadlines, or cancellation policies]

Payment Terms: Please make checks payable to [Catering Company Name]. Balance due within [00] days of event.