CATERING INVOICE

[Mobile Food Business Name]
[Phone Number]
[Email/Website]

Invoice #: _____
Date: _____
Event Date: _____

Client Information:

[Client Name]
[Billing Address]
[Contact Number]

Event Details:

[Event Location/Venue]
[Service Time Range]
[Estimated Guest Count]

Description / Menu Item	Qty/Guests	Unit Price	Amount
[Item Name/Service Description]	___	$0.00	$0.00
[Item Name/Service Description]	___	$0.00	$0.00
Service Fee / Travel Charge	1	$0.00	$0.00

Subtotal:	$0.00
Tax:	$0.00
Total Due:	**$0.00**

Payment Terms: [Net 30 / Due on Receipt]
Notes: Thank you for choosing us for your event! Please make checks payable to [Business Name].