# INVOICE

**[Your Agency Name]**
[Street Address]
[City, State, Zip]
[Email/Phone]

**Invoice #:** [0000]
**Date:** [MM/DD/YYYY]
**Event Date:** [MM/DD/YYYY]

BILL TO

**[Client Name]**
[Client Address]
[Client Phone]

EVENT DETAILS

**Event Type:** [e.g. Wedding, Gala, Birthday]
**Venue:** [Venue Name]
**Guests:** [Approx. Count]

| Description of Services / Items | Quantity/Hrs | Rate | Total |
|---|---|---|---|
| Event Planning & Coordination Fee | [0] | $[0.00] | $[0.00] |
| Venue Management & Logistics | [0] | $[0.00] | $[0.00] |
| Vendor Sourcing (Catering, Decor, Music) | [0] | $[0.00] | $[0.00] |
| On-site Staffing | [0] | $[0.00] | $[0.00] |

Subtotal: $[0.00]
Tax/VAT: $[0.00]
Deposit Paid: - $[0.00]
Balance Due: $[0.00]

**Payment Terms:** Please remit payment within [15] days of invoice date.

**Bank Details:** [Bank Name] | **Account:** [Number] | **Routing:** [Number]

Thank you for letting us organize your event!