INVOICE

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

Invoice #: ___________
Date: ___________
Due Date: ___________

CLIENT:

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

EVENT DETAILS:

Event Name: ___________
Event Date: ___________
Venue: ___________
Guest Count: ___________

Description	Quantity/Pax	Unit Price	Total
[Food/Menu Package Name]			
[Beverage Service]			
[Staffing & Labor]			

Description	Quantity/Pax	Unit Price	Total
[Equipment Rentals]			
[Service Fee / Gratuity]			

Subtotal: $0.00
Tax: $0.00

TOTAL: $0.00

Payment Instructions:
Please make checks payable to [Company Name].
Bank Transfer: [Bank Name] | Account: [Number] | Routing: [Number]

Notes: [Insert cancellation policy or additional terms here]