



Caterer:

Phone:

Email:

Address:

INVOICE

Invoice No:

Date:

Due Date:

Client Information

Client Name:

Contact Person:

Phone:

Email:

Billing Address:

Event Details

Event Date:

Location:

Service Time:

Guest Count:

Service Type:

MENU ITEM / CATERING SERVICE DESCRIPTION	QTY	UNIT PRICE	TOTAL
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MENU ITEM / CATERING SERVICE DESCRIPTION	QTY	UNIT PRICE	TOTAL
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Subtotal

Sales Tax (___%)

Service Charge / Gratuity

Travel / Setup Fee

Total Due

Payment Terms & Notes:

Client Signature

Caterer Signature