RECEIPT

Receipt No:

Date:

CLIENT DETAILS

Client Name:

Contact No:

Email:

Billing Address:

EVENT DETAILS

Event Date:

Event Type:

Guest Count:

Venue/Location:

DESCRIPTION OF CATERING SERVICES / MENU ITEMS	QTY	UNIT PRICE	TOTAL

PAYMENT METHOD

☐ Cash

☐ Credit / Debit Card

☐

Check
☐
Bank Transfer

Reference No:

Subtotal	
Service Charge / Staffing	
Tax	
Delivery / Setup	
Total Amount	
Amount Paid	
Balance Due	

PREPARED BY (CATERER)

RECEIVED BY (CLIENT)