

# Catering Invoice

Restaurant Name

Address Line 1

Address Line 2

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Invoice #: \_\_\_\_\_

Date: \_\_\_\_\_

Due Date: \_\_\_\_\_

## Billed To

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Event Details

Date: \_\_\_\_\_

Location: \_\_\_\_\_

Notes: \_\_\_\_\_

## Catering Items

Description	Qty	Unit Price	Total
_____	____	_____	_____
_____	____	_____	_____
_____	____	_____	_____
<b>Subtotal</b>			_____
Tax (%)			_____
<b>Total Due</b>			_____

## Special Notes / Instructions

---

---

---

Thank you for your business!