|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | FOOD CATERING INVOICE |  |  |  |  |
|  | **Invoice number**00001 | **Date of issue**mm/dd/yyyy |  |  |  |
|  |  |  |  |  |  |
|  | **Billed to** Client NameStreet addressCity, State CountryZIP Code | **Your company name**123 Your Street, City, State, Country, ZIP Code564-555-1234your@email.comyourwebsite.com |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | **Description** | **Unit cost** |  | **Qty/HR rate** | **Amount** |  |  |
|  |  |  |  |  |  |  |  |
|  | Your item name | $0 |  | 1 | $0 |  |  |
|  | Your item name | $0 |  | 1 | $0 |  |  |
|  | Your item name | $0 |  | 1 | $0 |  |  |
|  | Your item name | $0 |  | 1 | $0 |  |  |
|  | Your item name | $0 |  | 1 | $0 |  |  |
|  | Your item name | $0 |  | 1 | $0 |  |  |
|  | Your item name | $0 |  | 1 | $0 |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | **Subtotal** | $0 |  |  |
|  |  |  |  |  | **Discount** | $0 |  |  |
|  |  |  |  |  | **(Tax rate)** | 0% |  |  |
|  |  |  |  |  | **Tax** | $0 |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | **Invoice total** | $2,000 |  |
|  |  |  |  |  |  |  |  |
|  | **Terms**E.g. Please pay invoice by MM/DD/YYYY |  |  |  |  |  |  |
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