|  |  |  |  |
| --- | --- | --- | --- |
| CATERING INVOICE |  |  |  |
| **INVOICE NUMBER**00001 | **DATE OF ISSUE**mm/dd/yyyy |  |  |  |
|  |  | Your company name |
| **BILLED TO** Client NameStreet addressCity, State CountryZIP Code |  | 123 Your StreetCity, 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 |
|  |  |  |  |  |  |
| **INVOICE TOTAL**$2000 |  |  | **SUBTOTAL** |  | $0 |
|  |  | **DISCOUNT** |  | $0 |
|  |  |  | **(TAX RATE)** |  | 0% |
|  |  |  | **TAX** |  | $0 |
|  |  |  | **TOTAL** |  | $0 |
| **TERMS**E.g. Please pay invoice by MM/DD/YYYY |  |  |  |  |

