

Event Billing Invoice

Billed To:

Invoice #:

Date:

Event Name:

Event Date:

Due Date:

Service / Item	Qty	Unit Price	Amount
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Subtotal	<input type="text"/>		
Tax	<input type="text"/>		
Total	<input type="text"/>		

Notes / Terms:

Authorized Signature:

Date: