

# INVOICE

#INV-001

**Personal Trainer Name**

Phone: (555) 000-0000

Email: trainer@email.com

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**Bill To:**

Client Name

Client Address

City, State, Zip

**Date Issued:** \_\_\_\_\_

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

Description	Date/Qty	Rate	Amount
Personal Training Session (Home/Mobile)		\$	\$
Nutrition Consultation / Program Design		\$	\$
Travel Fee / Surcharge		\$	\$
			Subtotal: \$ _____

Tax: \$ \_\_\_\_\_

**Total Balance: \$ \_\_\_\_\_**

**Payment Methods**

Venmo: @Username | Zelle: email@example.com | Cash/Check

*Thank you for your hard work and commitment to your fitness goals!*