INVOICE

[Instructor Name / Business Name]

[Address Line 1]
[Phone Number]
[Email Address]

Invoice #: _____

Date: _____

BILL TO:

[Client Name]
[Client Address]
[Client Phone]

PAYMENT DETAILS:

Due Date: _____

Method: [Cash / Transfer / Card]

Description (Session Type/Date)	Qty/Hrs	Rate	Amount
Personal Training Session - [Date]			
Group Fitness Class - [Date]			

Description (Session Type/Date)	Qty/Hrs	Rate	Amount
Nutritional Consultation			

Subtotal: $_____

Tax / Fees: $_____

TOTAL DUE: $_____

Notes / Payment Instructions:

Please make checks payable to [Name] or transfer to [Account Details]. Thank you for your hard work this month!