INVOICE

[Instructor Name]
[Business Address]
[Phone Number]
[Email/Website]

Invoice #: *[001]*
Date: *[Month DD, YYYY]*
Due Date: *[Date]*

BILL TO:

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

DATE	DESCRIPTION / SESSION TYPE	QTY/HRS	RATE	AMOUNT
[Date]	*[Personal Training Session]*	*[1]*	*[$0.00]*	*[$0.00]*
[Date]	*[Nutritional Consultation]*	*[1]*	*[$0.00]*	*[$0.00]*

Subtotal: $0.00
Tax: $0.00

TOTAL DUE: $0.00

PAYMENT INSTRUCTIONS:

[Bank Transfer Details / Venmo / PayPal Info]

Thank you for your commitment to your fitness goals!