INVOICE

[Your Business Name]
[Street address]
[City, State ZIP]
[email@yourbusiness.com]
[(555) 555-0123]

BILL TO

[Client Name]
[Street address]
[City, State ZIP]
[client@email.com]
Client: [Client name]

Invoice number:	PT-0098
Invoice date:	10/27/2026
Due date:	10/27/2026
Terms:	Due on receipt

SERVICE	UNIT PRICE	QUANTITY	AMOUNT
10-session package 60 min, valid 3 months	$650.00	1	**$650.00**
Single session [date], 60 min	$75.00	2	**$150.00**
Custom training program 12-week plan	$120.00	1	**$120.00**
Body composition assessment	$40.00	1	**$40.00**

NOTES/MEMO

Package sessions valid for 3 months from purchase. 24 hours' notice to reschedule, or the session is used.

Subtotal:	$960.00
Amount due:	**$960.00**