

PERSONAL TRAINER INVOICE

DETAILS

DATE: _____
 INVOICE NO. _____
 TERMS: _____
 TRAINER: _____

FROM

COMPANY: _____
 ATTN: _____
 ADDRESS: _____
 CITY, STATE: _____
 ZIP: _____
 PHONE: _____
 E-MAIL: _____

BILL TO

COMPANY: _____
 ATTN: _____
 ADDRESS: _____
 CITY, STATE: _____
 ZIP: _____
 PHONE: _____
 E-MAIL: _____

DESCRIPTION	HOURS	RATE (\$/HR)	AMOUNT (\$)
NOTES: _____ _____ _____			
	SUBTOTAL		
	DISCOUNT		
	TAX / VAT		
	TOTAL		

THANK YOU

