[Your business name]

[Street address]
[Town, postcode]
[Email]

INVOICE

No. INV-0001

BILL TO

[Customer name]

[Customer address]

ISSUE DATE
10 Sept 2026

DUE DATE
24 Sept 2026

DESCRIPTION	TIME	RATE	AMOUNT
Private lesson, 45 minutes	4	£40.00	**£160.00**
Clinic, 4 riders	1	£160.00	**£160.00**
Travel	30 miles	£0.45/mile	**£13.50**

Subtotal £333.50

TOTAL DUE £333.50

PAYMENT DETAILS

Bank	**[Bank name]**
Account name	**[Account name]**
Account no.	**[00000000]**
Sort code	**[00-00-00]**

NOTES

Payment due within 7 days of the invoice date.