

S.O.U.L

THE STEWARDSHIP OF UNIVERSAL LIGHT
thestewardsoul.com | aifatunji@outlook.com | (414) 210-8347

INVOICE Corporate Wellness Activation

BILL TO

Client Name

Street Address

City, State, ZIP

Client Email

INVOICE DETAILS

Invoice #: SOUL-2026-012

Invoice Date:

Due Date: Net 30

Service Date (Event date):

DESCRIPTION	QTY	RATE	AMOUNT
Corporate Wellness Activation <i>Half-day (3 hours), up to 40 participants: grounding rituals, breathwork, earth-centered practices</i>	1	\$2,000.00	\$2,000.00
Materials & supplies <i>Natural materials, handouts, and ritual items</i>	1	\$150.00	\$150.00
Travel <i>Milwaukee metro area</i>	1	\$75.00	\$75.00

Subtotal	\$2,225.00
Tax	\$0.00
Deposit received (50%)	-\$1,112.50
BALANCE DUE	\$1,112.50

SERVICE DESCRIPTION

An immersive wellness experience that brings the healing power of nature into the workplace. Includes a planning call, a facilitated half-day program, and a short follow-up with your team lead. W-9 available on request.

PAYMENT TERMS & POLICIES

- A 50% deposit is due on signing the service agreement. The balance is due net 30 from the invoice date.
- Additional participants beyond 40 are billed at \$25 per person. Additional hours are billed at \$250 per hour.
- Rescheduling with 14 or more days notice is free. Cancellations within 14 days forfeit the deposit.

PAYMENT METHOD

Cash App: \$aifatunji | Zelle / Venmo / Check payable to S.O.U.L

I will pay by:

S.O.U.L. services are spiritual, educational, and wellness offerings. They are not a substitute for medical, mental health, legal, or financial advice or treatment, and no specific outcome is guaranteed.

Thank you for trusting S.O.U.L. with your journey.

CLIENT CONFIRMATION

Client Signature (type full name): Date: