

[INSTITUTION NAME]

[Street Address]
[City, State, Zip]
[Phone Number]

INVOICE

Invoice #: _____

Date: _____

STUDENT INFORMATION

Name: _____

ID: _____

Program: _____

Semester: _____

PAYMENT STATUS

Due Date: _____

Status: Pending / Unpaid

Method: _____

Description	Reference	Amount
Enrollment / Registration Fee	ENR-001	\$0.00
Tuition Fee (Per Credit/Fixed)	TUI-102	\$0.00

Description	Reference	Amount
Laboratory & Facilities Fee	LAB-200	\$0.00
Student Services & Insurance	SSI-050	\$0.00
Library & Tech Access	LIB-010	\$0.00
Subtotal: \$0.00		
Discount / Scholarship: (\$0.00)		
Total Due: \$0.00		

Please include the Invoice Number in your bank transfer or check payment.

Thank you for your enrollment.