

# INVOICE

**Tutor/Agency Name**

Street Address

City, State, Zip

Email:

**Invoice #:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Due Date:** \_\_\_\_\_

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**BILL TO:**

Student/Parent Name

Street Address

City, State, Zip

Contact Number

**EXAM DETAILS:**

Subject/Test: \_\_\_\_\_

Total Hours: \_\_\_\_\_

Session Period: \_\_\_\_\_

Description	Date	Hours/Qty	Rate	Amount
Private Prep Session -			\$	\$
Private Prep Session -			\$	\$
Materials / Practice Exams			\$	\$

Description	Date	Hours/Qty	Rate	Amount
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Subtotal: \$ \_\_\_\_\_  
Tax/Fees: \$ \_\_\_\_\_  
Total Due: \$ \_\_\_\_\_

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**PAYMENT INSTRUCTIONS:**

Please make checks payable to **[Provider Name]** or pay via **[Electronic Method]**. Thank you for your business and good luck with your examinations.