PROFORMA INVOICE

[Test Prep Service Name]
[Business Address Line 1]
[City, State, Zip Code]
[Email / Phone]

Date: [MM/DD/YYYY]
Proforma #: [00000]
Valid Until: [MM/DD/YYYY]

Bill To:

[Student/Client Name]
[Address Line 1]
[City, State, Zip Code]
[Phone Number]

Exam Details:

Target Exam: [e.g. SAT/GRE/IELTS]
Session Cycle: [e.g. Fall 2024]

Service Description	Qty/Hours	Rate	Total
[Service Name - e.g. Group Coaching Class]	[0]	$[0.00]	$[0.00]
[Service Name - e.g. 1-on-1 Tutoring Hours]	[0]	$[0.00]	$[0.00]
[Materials - e.g. Practice Workbooks & Digital Access]	[0]	$[0.00]	$[0.00]

Subtotal: $[0.00]
Discount: ($[0.00])
Tax: $[0.00]

Total Amount: $[0.00]

Payment Terms & Instructions:

[Insert Bank Name / Account Details / Payment Link]

Note: This is a proforma invoice provided prior to the delivery of services. A tax invoice will be issued upon receipt of payment.