

TUTORING SERVICE

INVOICE RECEIPT

Hourly Session Invoice & Receipt

Invoice/Receipt # _____

Date: _____

TUTOR / PROVIDER INFO

Name:

Company:

Phone:

Email:

STUDENT / CLIENT INFO

Student Name:

Parent/Client:

Phone:

Email:

DATE	SUBJECT / LESSON DESCRIPTION	HOURLY RATE	HOURS	AMOUNT
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Subtotal _____

Discount / Tax _____

Total Amount Due _____

Amount Paid _____

Balance Remaining _____

Payment Method

- Cash
- Check (No. _____)
- Bank Transfer
- Card / Online

Notes / Terms:

Tutor / Representative Signature

Client / Parent Signature