
INVOICE

Educational Services

STUDENT & PARENT DETAILS

Student Name:

Student ID / Grade:

Parent / Guardian:

Billing Address:

INVOICE DETAILS

Invoice Number:

Invoice Date:

Due Date:

Term / Semester:

DESCRIPTION OF FEE / SERVICE	QTY / TERM	RATE	TOTAL AMOUNT
Enrollment Fee			
Tuition Fee			
Technology & Laboratory Fee			
Textbooks & Learning Materials			
Extracurricular Activities Fee			

Subtotal:

Scholarship /
Discount:

Tax / Administrative
Fee:

Total Due:

PAYMENT INSTRUCTIONS & TERMS

AUTHORIZED SCHOOL REPRESENTATIVE

PARENT / GUARDIAN SIGNATURE