INVOICE FOR THE MONTH OF _____

(All monthly timesheets are to be mailed on the 1st of each month. The timesheets must be in our office by the 7th to invoice District.)

TUTOR'S NAME:_____

ADDRESS: (To Send Check To)_____Apt#(if any):_____

City:_____Zip Code:_____

IMPORTANT: Use a NEW timesheet per student for every month of tutoring. Do not put multiple months on one timesheet.

List of 1on1 Student(s): Student's Name	Hours	Rate ($/hr)	Total ($)

List of 1on2 Student(s): Student's Name : Student's Name	Hours	Rate ($/hr)	Total ($)
:			
:			
:			
:			
:			
:			
:			

List of 1on3 Student(s): Student's Name: Student's Name: Student's Name	Hours	Rate	Total ($)
: :			
: :			
: :			
: :			
: :			

GRAND TOTAL ($):

Mail ALL documents and this Invoice sheet to:

ACE Tutoring Riverside Center
3576 Arlington Ave, Suite 300
Riverside, CA 92506
Tel: (951) 367-0158 / Fax: (951) 686-8097