

## CUSTOMER INVOICE



# Invoice No: SA-T-SCI-158

### BILL TO

Parent Name	Student Name	Student ID	Phone	Email	Registration Fee
TestoneParent	TestoneStudent	2025-09-A158	N/A	N/A	\$25

### TUTORING SERVICES

Category	Subject	Class Type	Sessions (hrs)	Rate/Session	Total Amount (\$)
Grade-2	Science	1 on 1	35	\$25.00	\$875.00*

### PAYMENT INSTRUCTIONS

Make Check Payable to

**Sypher Academy LLC**

OR

Zelle (*input this email address in place of phone number,*  
*admin@sypheracademy.com*)



**Payment due within 3 days of invoice date or prior to start date.**

**\* registration fee incl.**

Contact Sypher Academy LLC regarding questions or clarifications

**Email Address:** admin@sypheracademy.com

**Website:** www.sypheracademy.com