

CUSTOMER INVOICE



Invoice No: SA-T-MAT-160

BILL TO

| Parent Name | Student Name | Student ID | Phone | Email | Registration Fee |
|---------------|----------------|--------------|-------|-------|------------------|
| TestoneParent | TestoneStudent | 2025-09-A160 | N/A | N/A | \$25 |

TUTORING SERVICES

| Category | Subject | Class Type | Sessions (hrs) | Rate/Session | Total Amount (\$) |
|----------|-------------|--------------|----------------|--------------|-------------------|
| Grade-3 | Mathematics | 1 on 1 | 10 | \$25.00 | \$250.00* |
| Grade-2 | Mathematics | Group 2 to 4 | 10 | \$25.00 | \$250.00* |
| Grade-4 | Mathematics | 1 on 1 | 10 | \$25.00 | \$250.00* |

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