

INVOICE

Phone (702) 333-6565

Payee:

Phone#



DESCRIPTION	AMOUNT
Cost of _____'s tuition	\$0.00
Total Due:	\$0.00

Is the Parent's Responsibility already taken out? ☐ Yes ☐ No

Name of person filling out invoice:

**If you have any questions concerning this invoice, contact us:
(702) 333-6565, info@mboptribalchildcare.org**