

INVOICE

BILL TO:
 ALU LIKE, Inc.
 Native Hawaiian Summer School Assistance Program
 2969 Mapunapuna Place, Suite 200
 Honolulu, Hawaii 96819

1 SCHOOL NAME: _____

2 MAKE CHECK PAYABLE TO: Enter your school's name and check payable information in the space provided

DATE: Insert current date **3**

4 INVOICE NO.: Insert your control invoice number

SUMMER SCHOOL COST for the following STUDENT(s):		Voucher No	Course	Tuition Amount
Last Name	First Name			
Kai	Moana	135	English II	190.00
Lei	Ana	147	Algebra II	190.00
5		6	7	8
<div style="border: 1px solid black; padding: 5px; display: inline-block;">You may submit more than one invoice if needed</div>		SAMPLE		<div style="border: 1px solid black; padding: 5px; display: inline-block;">Submit invoice 2 days after the start of Summer School</div>
				9
			TOTAL INVOICE AMOUNT DUE TO SCHOOL	\$ 380.00

10 _____
 School Representative - Signature

12 _____
 Phone No.

11 _____
 Print Name and Title

13 _____
 Email

GRADE(S) & ATTENDANCE

SUBMIT TO:

ALU LIKE, Inc.

Native Hawaiian Summer School Assistance Program

2969 Mapunapuna Place, Suite 200

Honolulu, Hawai'i 96819

1

SCHOOL NAME:

ADDRESS:

Enter your school's name and address in the space provided

DATE:

Insert current date

2

3

Total School Days
20

Last Name	First Name	Voucher #	Course	Grade	Days Absent
Kai	Moana	135	English II	A	0
Lei	Ana	147	Algebra II	A	1
4		5	6	7	8

Completion of this form is a requirement of our funder

SAMPLE

Complete ALL columns
SUBMIT NO LATER THAN
JULY 25, 2018

9

School Representative - Signature

11

Phone No.

10

Print Name and Title

12

Email

If grades are not given, please indicate it on this form.

GRADE(S) & ATTENDANCE

SUBMIT TO:

ALU LIKE, Inc.

Native Hawaiian Summer School Assistance Program

2969 Mapunapuna Place, Suite 200

Honolulu, Hawai'i 96819

SCHOOL NAME: _____

ADDRESS: _____

Total School Days

DATE: _____

Last Name	First Name	Voucher #	Course	Grade	Days Absent

*If grades are not given, please
indicate it on this form.*

School Representative - Signature_____
Phone No._____
Print Name and Title_____
Email

Revised: 03/15/2018