



LESSON INVOICE

Send to: Sky Rappoport, COTA
P.O. Box 161
Monterey, CA 93942

Month of Invoice: _____

Student: _____ Instrument/type of lesson: _____

Teacher: _____ Teacher Phone: _____

Teacher Address: _____

Cost per lesson: \$ _____

Date of Lesson	Length of Lesson	Full fee for lesson	Amount Parent Paid*	Amount COTA Owes
TOTALS:				

I verify that these lessons have been received: _____
Parent Signature

I verify that these lessons have been provided: _____
Teacher Signature

* If this is a *matching award* record the **total amount** of the lesson and the **amount the parent has paid**. Bill COTA for the remaining amount. **Do not** bill COTA for missed lessons.

Billing is **required** on a monthly basis. Prior to receiving payment, each teacher is required to have a W-9 form on file with the COTA office (Call Sky at 649-4495 for a form). Please record the date of the lesson and have the parent sign for the student's attendance. Indicate the length of lessons (1 hour, ½ hour, etc...) and the total cost for that lesson.

COTA is responsible only for the amount identified in the award and when it is expended a new award request must be approved by the Awards Committee before funding is continued. Invoices received by the second or fourth Monday of the month will be processed within five days after that date. There are no carry-over provisions for awards. All awards expire at the end of the six month award period.