

Colorado Consulting Services
5320 East Dakota Avenue
Denver,
Colorado 80246
303-393-1622 office
303-355-2161 – FAX

Tuition Receipt

Student Name: _____

Course Name: _____

Course Number: _____

**Academic
Institution:** _____

Location: _____

Date of Completion: _____

Instructor: _____

Credit: _____

Cost: _____

Signature of Director/Instructor: _____ Jay H. Wissot _____