

**Colorado Consulting Services
5320 East Dakota Avenue
Denver, CO 80246
303-393-1622 Office
303-388-6610 FAX**

Tuition Receipt

Student Name: _____

Course Name: _____

Course Number: _____

Academic Institution: _____

Location: _____

Date of Completion: _____

Instructor: _____

Credit: _____

Cost: _____

**Confirmed by: Dr. Jay H. Wissot
President, Colorado Consulting Services, Inc.**