Maranatha College
Instructor Voucher

Instructor's Name: _____ **Date of Report:** _____
Semester: _____ **Completion Date:** _____

Name	Registration	Class	Tuition	Textbooks	Appalachian Scholarships	Instructor Scholarship	Prepaid	Paid	Balance Due
Total									
Collected Tuition									
	Students	Audits	Total						
Number of Students/Audits									
Less Instructor Scholarships									
Total for Instructor/Payroll									