INVOICE

Commission Earned

Invoice #: [0000]

Date: [Date]

Affiliate Information:

[Affiliate Name]
[ID Number]
[Email Address]
[Address/Tax ID]

Payable To:

[Company Name]
[Finance Department]
[Company Address]

Description	Sales Volume	Rate (%)	Amount
[Product/Service Category]	$[0.00]	[0.0]%	$[0.00]
[Bonus/Incentive]	-	-	$[0.00]

Subtotal: $[0.00]

Tax: $[0.00]

Total Payable: $[0.00]

Payment Instructions:

Payment Method: [PayPal/Bank Wire/Check]
Account Reference: [Email or Account Number]
