INVOICE

Reference: #_____

Date: _____

Currency: _____

AFFILIATE / PAYEE

[Name/Company Name]
[Address Line 1]
[City, State, Zip]
[Country]
[Tax ID / VAT Number]

BILL TO

[Network/Company Name]
[Address Line 1]
[City, State, Zip]
[Country]

Description (Campaign/Period)	Quantity/Clicks	Rate	Amount
Commission: [Period Start] - [Period End]	_____	_____	_____
Performance Bonus (if applicable)	-	-	_____

Subtotal: _____
Tax/VAT (___%): _____
Total Payable: _____

INTERNATIONAL PAYMENT INSTRUCTIONS

Bank Name: _____
Account Holder: _____
IBAN: _____
SWIFT/BIC: _____
Routing # / Sort Code: _____
Intermediary Bank (if any): _____

Commission earned as an independent contractor. All figures are in the specified currency.