

INVOICE

Management Commission

Invoice #: [000]

Date: [MM/DD/YYYY]

FROM: MANAGEMENT

[Management Name/Company]
[Address Line 1]
[City, State, Zip]
[Email/Phone]

BILL TO: ARTIST

[Artist Name/Entity]
[Address Line 1]
[City, State, Zip]
[Email/Phone]

ENGAGEMENT / PROJECT DATE	SOURCE OF GROSS INCOME	GROSS AMOUNT	COMM. %	TOTAL DUE
[Date]	[Event Name / Performance / Royalty]	\$0.00	[0]%	\$0.00
[Date]	[Brand Deal / Merchandise / Other]	\$0.00	[0]%	\$0.00

Subtotal: \$0.00

Expenses Reimbursable: \$0.00

Total Payable: \$0.00

PAYMENT INSTRUCTIONS

Please make all payments payable to: **[Payee Name]**
Bank: [Bank Name] | Account: [Number] | Routing: [Number]
Due Date: [Date]