

COMMISSION INVOICE

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

Invoice #: [00000]
Date: [MM/DD/YYYY]
Due Date: [MM/DD/YYYY]

Bill To (Performer):

[Performer Legal Name]
[Stage Name]
[Address]
[Tax ID/SSN]

Project/Engagement:

[Production/Contract Name]
[Performance Date Range]
[Client/Studio Name]

| Description of Earnings | Gross Amount | Commission % | Commission Due |
|---------------------------------------|--------------|--------------|----------------|
| [e.g., Performance Fee - Episode 101] | [\$[0.00]] | [0]% | [\$[0.00]] |
| [e.g., Residuals/Royalties] | [\$[0.00]] | [0]% | [\$[0.00]] |
| [e.g., Travel/Expense Reimbursement] | [\$[0.00]] | 0% | \$0.00 |

Total Gross: \$[0.00]
Management Fees: \$[0.00]

Misc. Expenses: \$[0.00]
Total Amount Due: \$[0.00]

Payment Instructions:

Please make checks payable to: [Agency Name]
Bank Transfer (ACH/Wire): [Routing #] / [Account #]

Thank you for your professionalism and partnership.