

# COMMISSION INVOICE

No: [Invoice #]  
Date: [Date]

[Reseller Name]  
[Tax ID / VAT Number]  
[Address Line 1]  
[Email/Phone]

**BILL TO (VENDOR)**

[Software Vendor Name]  
[Accounts Payable Dept]  
[Vendor Address]  
[City, State, Zip]

**PAYMENT TERMS**  
Net [30] Days  
Due Date: [Date]

Sale Date	Reference / End-Customer	Product/SKU	Sale Amount	Rate (%)	Commission
[MM/DD/YYYY]	[Customer Name / Order ID]	[Software License Name]	[\$[0.00]]	[0]%	[\$[0.00]]
[MM/DD/YYYY]	[Customer Name / Order ID]	[Subscription Renewal]	[\$[0.00]]	[0]%	[\$[0.00]]

Subtotal: \$[0.00]  
Tax (if applicable): \$[0.00]  
Total Payable: \$[0.00]

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**Payment Instructions:**

Bank Name: [Name]

SWIFT/BIC: [Code]

Account/IBAN: [Number]

*Please include Invoice Number as payment reference.*