COMMISSION INVOICE

Consultant: [Consultant Name/Firm]

[Address Line 1]
[Email / Phone]

Invoice #: [0000]

Date: [MM/DD/YYYY]

Bill To:

[Client Company Name]
[Contact Person]
[Client Address]

Project Details:

Engagement: [Project Name/ID]
Commission Cycle: [Start Date] - [End Date]

Deliverable / KPI Metric	Metric Value	Commission Rate (%)	Total Due
[e.g., Change Adoption Rate Over Target]	[Value]	[0.0%]	$[0.00]
[e.g., Training Completion Milestone]	[Value]	[0.0%]	$[0.00]
[e.g., Cost Savings Realized]	[Value]	[0.0%]	$[0.00]

Subtotal: $[0.00]

Tax (if applicable): $[0.00]

Grand Total: $[0.00]

Payment Instructions:
Bank: [Bank Name] | Account: [Account Number] | Routing: [Routing Number]

Notes: All commission calculations are based on the mutually signed Change Management Agreement dated [Date].