COMMISSION INVOICE

[Consultant/Agency Name]
[Address Line 1]
[Email/Phone]

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

BILL TO

[Client Name]
[Company Name]
[Client Address]

PROJECT REFERENCE

[Project Name/ID]
[Contract Date]

Description of Service / Deal Closed	Transaction Value	Rate (%)	Commission Amount
[Referral Fee / Performance Bonus / Closed Lead]	$0.00	0%	$0.00
[Additional Commission Detail]	$0.00	0%	$0.00

Subtotal: $0.00
Tax ([0]%): $0.00
Total Due: $0.00

PAYMENT INSTRUCTIONS

Bank Name: [Name] | Account: [Number] | Wire/Swift: [Code]

Terms: Net [30] days. Please include invoice number with payment.