Your company letterhead/logo

Commission Invoice (International) - SAMPLE ONLY

Date:			
[Your company name] [Your full company address]			Tel: [number] Fax: [number] Email: [address]
INVOICE NO:		_	
Invoice to:	Centre for English Teaching University of Sydney (G01) NSW 2006 Australia	g	Fax: 61 2 9036 7908
Please pay cor	mmission for the following stu	udent:	
Family Name:			
Given Name:			
Student Enquiry Number:			
Course/Prograi	m: (eg: EGP, EAP etc)		
Start Date:	-		
Finish Date:	-		
No. of Weeks:	-		
Tuition fee:	-	AUD\$	
Commission Pe	rcentage %:		
Total commission	on:	AUD\$	
Please send ch	eque made out to:		
OR	y name] - send to: [address payment to the following ac	where cheque is to be sent]	
Bank name:	, , , , , , , , , , , , , , , , , , , ,		
Country:	-		
Branch name:	-		
Branch no:			
Branch address:			
Account name	-		
Account no:	_		
Swift code:	_		
IBAN no:	-		
Yours sincerely	-		

[Name of the person in charge of commission claims] [Company Title]