

COMMERCIAL PARTNERSHIP

JOINT ALLIANCE INVOICE

Invoice Number: _____
Invoice Date: _____
Due Date: _____
Agreement Ref: _____

LEAD PARTNER / BILLING ENTITY

ALLIANCE PARTNER / RECIPIENT

PROJECT / SHARED ACTIVITY DESCRIPTION	TOTAL VALUE	PARTNER SHARE %	DUE TO PARTNER
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SETTLEMENT TERMS & BANK DETAILS

Gross Subtotal: _____
Joint Pool Deduction: _____
Tax / VAT: _____
Net Partner Payout: _____

AUTHORIZED SIGNATORY - LEAD PARTNER

AUTHORIZED SIGNATORY - ALLIANCE PARTNER