REVOLVING CREDIT FACILITY INVOICE

Invoice No:

Invoice Date:

Due Date:

LENDER / ADMINISTRATIVE AGENT

Institution:

Department:

Address:

Contact Email:

Contact Phone:

BORROWER

Company Name:

Facility ID Ref:

Address:

Contact Person:

Contact Email:

FACILITY CREDIT SUMMARY

TOTAL CREDIT LIMIT	CURRENT OUTSTANDING PRINCIPAL	AVAILABLE CREDIT LINE	CURRENT BASE RATE (%)	MARGIN (%)

FEE & INTEREST BREAKDOWNS

DESCRIPTION / TRANSACTION DETAILS	PRINCIPAL BASE	RATE / FACTOR	CALCULATION PERIOD	AMOUNT DUE
Interest Charge (Drawdown Ref: _____)				
Commitment Fee (Unused Facility portion)				
Administrative / Agency Fee				
Other Fees (_____)				

WIRE TRANSFER PAYMENT INSTRUCTIONS

Bank Name:

ABA / Routing:

Account No:

Swift Code:

Beneficiary:

Reference:

Interest Due Subtotal:	
Fees Subtotal:	
Late Payment Penalties:	
Total Amount Due:	

Authorized Creditor Signature / Date

Authorized Borrower Acknowledgment / Date