Provider Commission Template

Required detail for provider commission statements, Excel is the preferred format.

- Cycle Date Being Paid Out (Required)
- Customer Name (Required)
- Account Number (Required)
- Net Billed (Required)
- Gross Commission (Required)
- Product (Required)
- Location (Preferred)
- Invoice number (Preferred)
- Order Number or additional identifiers (Preferred)
- Contract Start Date (Preferred)
- Contract End Date (Preferred)
- Disconnect Date (Preferred)
- Term (Preferred)

Commission statements to be sent to : Commissions@appdirect.com with Provider Name in the subject line.