



Quarterly Royalty Report

Page 1 of ____

1 LICENSEE:

Company / Licensee

2 PREPARED BY:

Name (please print or type)

Title

Phone

Email

Signature (required)

Preparation Date

3 QUARTER: Please check the appropriate box.

☐ 1st Qtr. (July 1 thru Sept. 30; **Royalties Due: Oct. 30***)

☐ 3rd Qtr. (Jan. 1 thru March 31; **Royalties Due: April 30***)

☐ 2nd Qtr. (Oct. 1 thru Dec. 31; **Royalties Due: Jan. 30***)

☐ 4th Qtr. (April 1 thru June 30; **Royalties Due: July 30***)

Year

4 ORGANIZATION: Please provide a SEPARATE report and documentation for EACH organization, but feel free to put all royalties on one check.

- | | | | | | | | | |
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| <input type="checkbox"/> AXΩ | <input type="checkbox"/> AOP | <input type="checkbox"/> XΩ | <input type="checkbox"/> ΔΣΦ | <input type="checkbox"/> KKG | <input type="checkbox"/> ΦΔΕ | <input type="checkbox"/> ΦΣΣ | <input type="checkbox"/> ΣΧ | <input type="checkbox"/> ΤΒΣ |
| <input type="checkbox"/> ΑΔΠ | <input type="checkbox"/> ΑΦ | <input type="checkbox"/> ΧΦ | <input type="checkbox"/> ΔΤΔ | <input type="checkbox"/> ΚΚΨ | <input type="checkbox"/> ΦΔΘ | <input type="checkbox"/> ΠΑΦ | <input type="checkbox"/> ΣΔΤ | <input type="checkbox"/> ΤΚΕ |
| <input type="checkbox"/> ΑΕΦ | <input type="checkbox"/> ΑΦΩ | <input type="checkbox"/> ΧΨ | <input type="checkbox"/> ΔΥ | <input type="checkbox"/> ΚΦΛ | <input type="checkbox"/> FIJI | <input type="checkbox"/> ΠΒΦ | <input type="checkbox"/> ΣΚ | <input type="checkbox"/> ΘΧ |
| <input type="checkbox"/> ΑΕΠ | <input type="checkbox"/> ΑΣΑ | <input type="checkbox"/> ΔΧ | <input type="checkbox"/> ΔΖ | <input type="checkbox"/> ΚΣ | <input type="checkbox"/> ΦΚΨ | <input type="checkbox"/> ΠΚΑ | <input type="checkbox"/> ΣΛΒ | <input type="checkbox"/> ΘΦΑ |
| <input type="checkbox"/> ΑΓΔ | <input type="checkbox"/> ΑΣΦ | <input type="checkbox"/> ΔΔΔ | <input type="checkbox"/> ΓΦΒ | <input type="checkbox"/> ΛΧΑ | <input type="checkbox"/> ΦΚΣ | <input type="checkbox"/> ΠΣΕ | <input type="checkbox"/> ΣΝ | <input type="checkbox"/> ΘΤ |
| <input type="checkbox"/> ΑΓΡ | <input type="checkbox"/> ΑΣΤ | <input type="checkbox"/> ΔΓ | <input type="checkbox"/> ΚΑ | <input type="checkbox"/> NPC | <input type="checkbox"/> ΦΚΤ | <input type="checkbox"/> ΨΥ | <input type="checkbox"/> ΣΦΕ | <input type="checkbox"/> ΘΕ |
| <input type="checkbox"/> αΚΑΦ | <input type="checkbox"/> ΑΤΩ | <input type="checkbox"/> ΔΚΕ | <input type="checkbox"/> ΚΑΘ | <input type="checkbox"/> NSCS | <input type="checkbox"/> ΦΚΘ | <input type="checkbox"/> ΣΑΕ | <input type="checkbox"/> ΣΠ | <input type="checkbox"/> Triangle |
| <input type="checkbox"/> ΑΚΛ | <input type="checkbox"/> ΑΞΔ | <input type="checkbox"/> ΔΦΕ | <input type="checkbox"/> ΚΔ | <input type="checkbox"/> ΟΔΚ | <input type="checkbox"/> ΦΜ | <input type="checkbox"/> ΣΑΙ | <input type="checkbox"/> ΣΣΣ | <input type="checkbox"/> ZBT |
| <input type="checkbox"/> ΑΚΨ | <input type="checkbox"/> ΒΘΠ | <input type="checkbox"/> ΔΦΛ | <input type="checkbox"/> ΚΔΡ | <input type="checkbox"/> ΦΧΘ | <input type="checkbox"/> ΦΣΚ | <input type="checkbox"/> ΣΑΜ | <input type="checkbox"/> ΣΤΓ | <input type="checkbox"/> ZTA |

5 PRODUCT SALES & ROYALTIES DUE: If more space is needed, please utilize Page 2

Product Sold To	Payment Date	Invoice No.	Detailed Product Description	Quantity	Price/Unit	Gross Sales (Regular sales price including art or other related fees, less taxes and actual shipping.)
<Customer Last Name/Store/University>	01/01/2012	12345	Bid Day V-Necks	100	\$12.00	\$1,200.00



affinity consultants

SEND CHECK MADE PAYABLE TO:

Affinity Consultants, Inc.
3231-C Business Park Drive #300
Vista, CA 92081

Complete and return ALL pages of this quarterly report no later than thirty (30) days following the end of our fiscal quarter regardless of sales figures (even zero sales).

Checks should be made payable to: "Affinity Consultants, Inc."

* Per agreement, a \$15 surcharge per group will be assessed to each late report.

Sub-Total Gross Sales of Licensed Products (Page 1):	\$
Sub-Total Gross Sales of Licensed Products (Additional Pages):	\$
Less Actual Returns: (If any, include supplemental support)	\$
Total "Net" Gross Sales of Products:	\$
Royalty Percentage:	8.5%
Royalties Subtotal:	\$
Less Advance Royalty Balance:	\$
Royalties Due For This Quarter:	\$
Balance Remaining on Account:	\$



Quarterly Royalty Report – Product Sales Worksheet

Page ____ of ____

Company / Licensee

Year

□ 1st Qtr.

□ 3rd Qtr.

□ 2nd Qtr.

□ 4th Qtr.

Organization / Licensor

Product Sold To	Payment Date	Invoice No.	Detailed Product Description	Quantity	Price/Unit	Gross Sales <small>(Regular sales price including art or other related fees, less taxes and actual shipping.)</small>
<Customer Last Name/Store/University>	01/01/2012	12345	Bid Day V-Necks	100	\$12.00	\$1,200.00

Please add the subtotals from ALL worksheets, and include them in the "Sub-Total Gross Sales of Licensed Products (Additional Pages)" field on Page 1 of this report.

Sub-Total Gross Sales of Licensed Products:	\$
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