

**LANDLORD / PROPERTY MANAGEMENT**

[Business Name]

[Street Address]

[City, State, Zip]

**REFUND INVOICE**

Date: [Date of Issue]

Invoice #: [000001]

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**TENANT DETAILS:**

[Company Name / Tenant Name]

[Mailing Address]

[City, State, Zip]

**PROPERTY LEASED:**

[Suite / Unit Number]

[Building Name/Address]

Lease End Date: [MM/DD/YYYY]

Description	Amount
Original Security Deposit Held	\$ 0.00
Accrued Interest (if applicable)	\$ 0.00
<b>Subtotal: Gross Deposit</b>	<b>\$ 0.00</b>
LESS DEDUCTIONS:	
- Unpaid Rent / Common Area Maintenance (CAM)	(\$ 0.00)
- Repairs / Cleaning (Itemized Statement Attached)	(\$ 0.00)
- Other: [Description]	(\$ 0.00)
<b>TOTAL REFUND AMOUNT</b>	<b>\$ 0.00</b>

**Notes:** Please find the enclosed check for the total refund amount listed above. If you have any questions regarding these deductions, please contact the management office within [Number] days.

Authorized Signature

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