

REFERRAL FEE INVOICE

Invoice #: _____

Date: _____

[Referring Brokerage Name]

[Street Address]

[City, State, Zip]

[Tax ID/EIN]

BILL TO (RECEIVING BROKERAGE):

[Brokerage Name]

[Attention To/Agent Name]

[Street Address]

[City, State, Zip]

Transaction Details:

Closing Date: _____

Property Address: _____

Client Name(s): _____

Description	Sale Price	Commission %	Referral %	Total Due
Real Estate Referral Fee	\$	%	%	\$

Total Amount Due: \$ _____

PAYMENT INSTRUCTIONS:

Please make checks payable to: **[Referring Brokerage Name]**

Wired Funds Info (if applicable):

Bank: _____

Account #: _____

Routing #: _____

Terms: Payable upon close of escrow. Thank you for your business.