WAREHOUSE INVOICE

[Logistics/Warehouse Name]
[Street Address]
[City, State, Zip]
[Phone Number]

Invoice #: ___________

Date: ___________

Due Date: ___________

BILL TO

[Tenant Name/Company]
[Contact Person]
[Billing Address]
[Email Address]

FACILITY DETAILS

Unit/Suite: ___________
Total Square Footage: ___________
Lease Term: ___________

Description of Service/Rental	Qty / SQFT	Rate	Amount
Monthly Warehouse Base Rent			
Common Area Maintenance (CAM)			
Utility Surcharge (Electric/Water)			

Description of Service/Rental	Qty / SQFT	Rate	Amount
Loading Dock/Equipment Fees			
Security/Surveillance Fee			

Subtotal: $________
Tax Rate (%): ________
Total Due: $________

PAYMENT INSTRUCTIONS

Please make checks payable to: **[Company Name]**

Wire Transfer: [Bank Name] | Account: [Number] | Routing: [Number]

Note: A late fee of [0]% will be applied to balances unpaid after [Number] days.