COMMERCIAL LEASE INVOICE

Invoice #: _____
Date: _____
Due Date: _____

LESSOR / LANDLORD

[Name/Company]
[Address Line 1]
[City, State, Zip]
[Phone/Email]

LESSEE / TENANT

[Name/Company]
[Premises/Suite #]
[Address Line 1]
[City, State, Zip]

Description of Charges	Period	Amount
Base Monthly Rent	[MM/DD] to [MM/DD]	$ 0.00
Common Area Maintenance (CAM)	[Month, Year]	$ 0.00
Property Taxes / Insurance Share	[Month, Year]	$ 0.00
Utility Sub-metering / Other	[Description]	$ 0.00

Subtotal: $ 0.00

Sales Tax (if applicable): $ 0.00

Total Amount Due: $ 0.00

Payment Instructions:
Please make checks payable to _____.
For ACH/Wire transfers: Bank Name: _____ | Acct: _____ | Routing: _____

Late fees may apply if payment is received after the due date per lease agreement.