

[PROPERTY MANAGEMENT NAME]

[Street Address]
[City, State, Zip]
[Phone Number]

INVOICE

Date: [Date]
Invoice #: [0000]
Period: [Month, Year]

TENANT

[Business Name]
[Contact Person]
Suite [Number]
[Property Name]

PROPERTY INFORMATION

[Property Address]
Square Footage: [0,000] SF
Lease ID: [ID-000]

Description	Rate/SQFT	Amount
Base Monthly Rent	[\$[0.00]]	[\$[0.00]]
Common Area Maintenance (CAM)	[\$[0.00]]	[\$[0.00]]
Property Insurance / Taxes	[\$[0.00]]	[\$[0.00]]

Description	Rate/SQFT	Amount
Utility Reimbursement: [Type]	-	[\$[0.00]]
Late Fees / Other Charges	-	[\$[0.00]]

Subtotal: \$[0.00]

Sales Tax: \$[0.00]

Total Due: \$[0.00]

Payment Instructions: Please make checks payable to [Payee Name]. Include Invoice Number on check. Wire transfer details available upon request.

Due Date: [Date]