

INVOICE

Invoice #: _____

Date: _____

Property Manager / Company

Street Address

City, State, Zip

Email / Phone

Property Name/ID: _____

Owner Name: _____

Billing Period: _____

Description	Service Date	Rate/Price	Total
Management Fee (%)			\$
Cleaning/Turnover Fee			\$
Maintenance/Repairs			\$
Marketing/Platform Fees			\$
Other: _____			\$

Subtotal: \$ _____

Tax: \$ _____

Total Due: \$ _____

Payment Instructions:

Please make checks payable to _____ or pay via _____.

Thank you for your business.