

INTERIM INVOICE

Commercial Real Estate Services

INVOICE NUMBER

#INV-0000

DATE

[Date]

FROM: BROKERAGE/FIRM

[Company Name]
[Street Address]
[City, State, Zip]
[Tax ID/License #]

BILL TO: CLIENT/TENANT

[Client Name]
[Company Name]
[Street Address]
[City, State, Zip]

PROPERTY/PROJECT REFERENCE

[Property Name or Address]
Phase/Milestone: [e.g., Lease Execution / 50% Construction]

Description of Services/Milestone	Quantity/Unit	Rate/Price	Amount
[Service Description - e.g., Commission Installment 1]	1.0	\$0.00	\$0.00

Description of Services/Milestone	Quantity/Unit	Rate/Price	Amount
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[Service Description - e.g., Marketing Expenses]	1.0	\$0.00	\$0.00
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Subtotal: \$0.00
 Tax/VAT: \$0.00
 Total Amount Due: \$0.00

PAYMENT TERMS & INSTRUCTIONS

Due Date: [Date]
 Bank Name: [Name]
 Account Number: [Number]
 Routing/Swift: [Code]

Thank you for your business.