INVOICE

[Advisor/Firm Name]
[Address Line 1]
[City, State, Zip]
[Tax ID/EIN]

Date: [Date]
Invoice #: [0000]
Project Ref: [Project Name/Code]

CLIENT / INSTITUTION

[Institutional Client Name]
[Department]
[Address Line 1]
[City, State, Zip]

PAYMENT TERMS

Due Date: [Date]
Method: Wire Transfer / ACH

DESCRIPTION OF ADVISORY SERVICES	HOURS / UNIT	RATE	AMOUNT
Asset Management & Strategic Review - [Portfolio Name]	[0.00]	$[0.00]	$[0.00]
Market Analysis & Due Diligence - [Property Name]	[0.00]	$[0.00]	$[0.00]
Acquisition Advisory / Transaction Fee	[Flat/ %]	-	$[0.00]

Subtotal $[0.00]

Reimbursable Expenses $[0.00]
Total Due $[0.00]

WIRE INSTRUCTIONS

Bank: [Bank Name] | Account Name: [Name] | Account #: [00000000] | Routing/Swift: [00000000]