REAL ESTATE CAPITAL ADVISORS

[Street Address]
[City, State, Zip]
[Email/Phone]

INVOICE

Invoice #: [0000]
Date: [Date]
Due Date: [Date]

BILL TO

[Client Name / Entity]
[Contact Person]
[Street Address]
[City, State, Zip]

PROJECT / TRANSACTION

[Project Name or Asset Address]
Transaction Type: [Debt / Equity / M&A]
Target Capital: $[00,000,000]

DESCRIPTION OF SERVICES	BASIS / PERCENTAGE	AMOUNT
[e.g., Debt Placement Success Fee - Closing of First Mortgage]	[0.00]%	$0.00
[e.g., Equity Capital Raise - Series A Preferred]	[0.00]%	$0.00

DESCRIPTION OF SERVICES	BASIS / PERCENTAGE	AMOUNT
[e.g., Advisory Retainer / Underwriting Fee]	Flat Fee	$0.00

Subtotal: $0.00
Reimbursable Expenses: $0.00
Total Due (USD): $0.00

PAYMENT INSTRUCTIONS

Wire Transfer: [Bank Name] | Account: [Number] | Routing: [Number] | SWIFT: [Code]
Please include Invoice Number as a reference for all payments.