INVOICE

[Invoice Number]

[Property Management Name]
[Address Line 1]
[City, State, Zip]
[Tax ID / EIN]

BILL TO

[Tenant Business Name]
[Suite Number / Floor]
[Contact Person]
[Email Address]

INVOICE DETAILS

Date: [MM/DD/YYYY]
Due Date: [MM/DD/YYYY]
Lease Ref: [Lease ID Number]
Billing Period: [Month, Year]

Description	Sq. Ft. / Qty	Rate	Amount
Base Monthly Rent - Suite [Number]	[Area]	$[Rate]	$[0.00]
Common Area Maintenance (CAM)	1	$[Rate]	$[0.00]
Property Insurance / Taxes Allocation	1	$[Rate]	$[0.00]
Utility Surcharge (Electric/Water)	-	-	$[0.00]

Description	Sq. Ft. / Qty	Rate	Amount
Parking / Storage Fees	[Qty]	$[Rate]	$[0.00]

Subtotal: $[0.00]
Tax Rate: [0.0%]
Total Due: $[0.00]

PAYMENT INSTRUCTIONS

Please make checks payable to: **[Payee Name]**
ACH/Wire Transfer: [Bank Name] | Acct: [Number] | Routing: [Number]
Note: Late payments are subject to a penalty of [0%] after [Number] days.