

[BROKERAGE NAME]

[Street Address]
[City, State, Zip]
Tax ID: [00-0000000]

TAX INVOICE

Invoice #: [0000]
Date: [DD/MM/YYYY]

BILL TO:

[Client Name / Company]
[Billing Address]
[City, State, Zip]
VAT/Tax No: [If applicable]

TRANSACTION DETAILS:

Lease Type: [New/Renewal]
Agent: [Name]
Reference: [File Number]

PROPERTY DESCRIPTION:

[Retail Suite/Unit #] - [Shopping Center Name]
[Property Street Address]

Description of Services	Basis/Calculation	Amount
Professional Brokerage Commission	[Annual Rent] @ [%]	0.00
Marketing & Listing Fee	Flat Fee	0.00

Description of Services	Basis/Calculation	Amount
Administrative/Documentation Fee	Per Agreement	0.00
		Subtotal: 0.00
		Tax ([%]): 0.00
		TOTAL DUE: [Currency] 0.00

Payment Terms: Payable within [X] days. Please use Invoice # as reference.

Bank Details: [Bank Name] | **Account Name:** [Name] | **SWIFT/IBAN:** [Details]