

COMMISSION INVOICE

Invoice #: _____

Date: _____

[Agent/Agency Name]

[Street Address]

[City, State, Zip]

[Phone/Email]

BILL TO (CLIENT/PROPERTY OWNER)

[Name/Company]

[Street Address]

[City, State, Zip]

PROPERTY & LEASE DETAILS

Property: [Address/Unit]

Tenant: [Tenant Name]

Lease Term: [Start Date] - [End Date]

Description	Lease Value	Rate (%)	Amount
Leasing Commission - New Lease	\$	%	\$
Administrative/Marketing Fee	-	-	\$

Subtotal: \$ _____

Tax: \$ _____

Total Due: \$ _____

PAYMENT INSTRUCTIONS

Please make checks payable to: **[Payee Name]**
Bank Transfer: [Bank Name] | Account: [Number] | Routing: [Number]
Due Date: [Date]