

COMMISSION INVOICE

[Agency Name]
[Agency Address]

Invoice #: _____
Date: _____

BILL TO (OWNER/CLIENT)

[Owner Name]
[Owner Address]
[Phone/Email]

PROPERTY DETAILS

[Property Name/ID]
[Property Address]

Description (Lease Term / Tenant)	Rent Amount	Commission %	Total Due
[Service Description/Management Period]	\$	%	\$
[Additional Service/New Lease Fee]	\$	-	\$

Subtotal: \$ _____
Tax/VAT: \$ _____
Grand Total: \$ _____

PAYMENT INSTRUCTIONS

Bank: [Bank Name] | Account: [Account Number] | Routing: [Routing Number]

Please make checks payable to: [Agency Name]