

COMMISSION INVOICE

[Agency Name]

[Agency Address]

INVOICE #
DATE

BILL TO (LANDLORD/OWNER)
PROPERTY ADDRESS

Description	Tenant Name	Lease Term	Amount
Lease Commission Fees			
Marketing/Advertising	N/A	N/A	
Administrative Fees	N/A	N/A	

Subtotal \$0.00
Tax (%) \$0.00
Total Due \$0.00

PAYMENT INSTRUCTIONS

Bank:

Account Name:

Account Number:

Thank you for your business. Please remit payment within [Number] days.