

# COMMISSION INVOICE

Invoice #:

Date:

**[BROKERAGE NAME]**

[Address Line 1]

[City, State, Zip]

[Tax ID / License #]

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## BILL TO

**[Client/Principal Name]**

[Address Line 1]

[City, State, Zip]

AGENT/REPRESENTATIVE

Name:

ID:

Transaction / Property Description	Sale Price	Rate (%)	Amount
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[Reference #: \_\_\_\_\_]

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Subtotal: \$ 0.00

Adjustments/Fees: \$ 0.00

Total Commission: \$ 0.00

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## PAYMENT INSTRUCTIONS

Please make all checks payable to: [Brokerage Name]

Bank Name:

Account Number:  
Routing Number:

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date