

COMMISSION INVOICE

INVOICE #: _____

DATE: _____

FROM (AGENT/BROKERAGE):

License #: _____

BILL TO:

PROPERTY & TRANSACTION DETAILS:

Property Address: _____

Closing Date: _____ Sale Price: \$ _____

Description	Rate / %	Amount
Professional Real Estate Commission	_____	\$ _____
Administrative / Transaction Fees	-	\$ _____

Description	Rate / %	Amount
Other: _____	-	\$ _____
Total Commission Due:		\$ _____

PAYMENT INSTRUCTIONS:

Please make all checks payable to: _____

Wire Transfer Details (if applicable): _____

Thank you for your business.

AUTHORIZED SIGNATURE