COMMISSION INVOICE

Invoice #: _____
Date: _____

BROKER / AGENCY

[Name]
[Address]
[Tax ID / License #]

BILL TO

[Client Name]
[Client Address]

PROPERTY DETAILS

Parcel/Address: _____
Closing Date: _____

Description	Sale Price	Rate (%)	Total
Commercial Land Sale Commission	$	%	$
Other Fees (Marketing/Admin)	-	-	$

Subtotal: $_____
Tax: $_____
Total Due: $_____

PAYMENT INSTRUCTIONS

Wire Transfer / Check details: _____

Thank you for your business.