COMMISSION INVOICE

[Broker/Agency Name]
[Address Line 1]
[City, State, Zip]

Invoice #: _____
Date: _____

BILL TO (LESSOR/LANDLORD):

_____
_____
_____

PROPERTY DESCRIPTION:

Warehouse: _____
Unit/SQFT: _____
Tenant: _____

Lease Details & Commission Calculation	Amount
Lease Term: _____ to _____ **Total Aggregate Lease Value:** $_____ **Commission Rate:** _____%	$
Payment Schedule: [ ] Full Payment / [ ] Installment #___ of ___	$

Subtotal: $_____
Tax (if applicable): $_____
Total Due: $_____

PAYMENT INSTRUCTIONS:

Bank: _____
Account Name: _____

Account #: _____
Routing #: _____

AUTHORIZED SIGNATURE:

Terms: Payment is due within ___ days of invoice date. Thank you for your business.