

Portfolio Management Services

[Company Address]
[City, State, Zip]
[Email/Phone]

INVOICE

Invoice #: [0000]
Date: [MM/DD/YYYY]
Due Date: [MM/DD/YYYY]

BILL TO:

[Client Name]
[Property/Portfolio Address]
[Client Contact Email]

Service Description	Property Reference	Rate/Fee	Amount
Monthly Management Fee	[Property Address/Unit]	[% or Flat]	\$0.00
Leasing/Placement Service	[Property Address/Unit]	[Rate]	\$0.00
Maintenance Oversight	[Work Order #]	[Rate]	\$0.00
Administrative/Reporting	[Portfolio Wide]	[Rate]	\$0.00
Subtotal: \$0.00			

Tax: \$0.00
Total Due: \$0.00

Notes: Please make checks payable to [Company Name]. For ACH transfers, please use the instructions provided in your portal.

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