RENTAL INVOICE

Invoice No: _____

Date: _____

Due Date: _____

Lease ID: _____

LANDLORD / LESSOR

_____

_____

_____

_____

TENANT / LESSEE

_____

_____

_____

_____

LEASED PREMISES (PROPERTY ADDRESS)

_____

_____

Billing Period:

From: _____

To: _____

DESCRIPTION	AMOUNT
Base Rent Monthly commercial property rental fee	
Common Area Maintenance (CAM) Pro-rata share of operating expenses	
Property Insurance Tenant proportionate share	
Property Taxes Tenant proportionate share	

DESCRIPTION	AMOUNT
Utilities Water, electricity, waste, etc. (if billed separately)	
Other Charge / Late Fee Specify:	

Subtotal	
Tax / VAT	
Total Due	

PAYMENT INSTRUCTIONS & TERMS

Please remit payment in accordance with the terms of your lease agreement. Late payments may be subject to additional charges.

Bank Name:

Account Name:

Account Number:

Routing Number:

SWIFT/BIC Code: