

Rent Invoice

Landlord Name: _____
Landlord Address: _____
Landlord City, State, ZIP: _____
Landlord Phone Number: _____

TO:

Name: _____
Address: _____
City, State, ZIP: _____
Phone Number: _____

Invoice #: _____
Date: _____
Due Date: _____
Terms: _____

Property Address	Rent	Fee(s)	Total (\$)
		Subtotal	
		Other	
		Total	

Terms and Conditions

Thank you for being a reliable tenant. Please send payment within _____ days of receiving this invoice. There will be a _____% per _____ on late invoices.

Payment can be made by the following methods:

- PayPal: Please send payment to the following PayPal email address: _____
- Bank Transfer: Please send payment to the following bank account: _____
- Cheque: Please send payment to the following address: _____