

kw SOUTHWEST
KELLERWILLIAMS, REALTY
Apartment Invoice

Keller Williams agent → please turn in a copy to your MCA office.

DATE: _____ Invoice # _____
(Example: Agent Name_001)

TO: APT Complex Name _____
APT Complex Address _____
APT Complex Ph# _____
ATTN: _____

TENANT: _____

Leased Unit #: _____

Leased Term _____

MONTHLY RENTAL: _____

COMMISSION DUE: _____

KELLER WILLIAMS AGENT: _____

Make check payable to:

Keller Williams Realty Southwest (please include agent's name in check memo)

Mail to:

Attn: _____ (agent's name)

Keller Williams Realty Southwest
1650 Hwy 6 Suite 350
SUGAR LAND, TX 77478
281-265-0000