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| RENT RECEIPT | | | | | | | |
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| **Date:** |  | | | | | | |
| **Receipt #:** |  | | | | | | |
| (If at any point during your tenancy your rent falls 14 days in arrears, a termination for non-payment of rent may be issued. ) | | | | | | | |
| **House Owner Name** | | |  | |  | **Tenant Name** |  |
| **Address** | | |  | | **Address** |  |
| **City** | | |  | | **City** |  |
| **State / Province** | | |  | | **State / Province** |  |
| **Phone Number** | | |  | | **Phone Number** |  |
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| **Rent for the Month of:** | |  | | | | | |
| **Paid By:** | |  | | | | | |
| **Received By:** | |  | | | | | |
| **Property Address:** | |  | | | | | |
| **Amount Received:** | |  | | | | | |
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| **THANK YOU!** | | | | **Recipient Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | |

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| **State / Province** | | |  | | **State / Province** |  |
| **Phone Number** | | |  | | **Phone Number** |  |
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| **Rent for the Month of:** | |  | | | | | |
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| **Received By:** | |  | | | | | |
| **Property Address:** | |  | | | | | |
| **Amount Received:** | |  | | | | | |
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| **THANK YOU!** | | | | **Recipient Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | |