

RECEIPT

Date: _____

NO. _____

Address of Rental Unit: _____

Tenant(s): _____

Payment Received For: ☐ Rent ☐ Rent Deposit ☐ Rent Arrears ☐ NSF Fees

☐ Other _____

Payment Type: ☐ Cheque ☐ Cash ☐ E-Transfer ☐ Other _____

Notes: _____

Amount: _____

Landlord's Name: _____

Landlord/ Authorized Agent Signature: _____