

SECURITY DEPOSIT RECEIPT

LESSOR/OWNER: _____

LESSEE: _____

PROPERTY ADDRESS: _____

SECURITY DEPOSIT AMOUNT: _____

RECEIVED FROM: _____

NAME/ADDRESS OF FINANCIAL INSTITUTION WHERE FUNDS WILL BE HELD:

RECEIVED BY:

(Signature of Authorized Agent)

(Date)

(Printed Name)

Paid by:	<input type="checkbox"/> Cash	<input type="checkbox"/> Check	<input type="checkbox"/> Money Order	<input type="checkbox"/> Cashier's Check
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