

Monthly Rental Receipt Form

Receipt No.: _____

Date of Issue: _____

TENANT DETAILS

Tenant Name: _____

Rental Property Address: _____

Unit No.: _____

City: _____ State: _____ ZIP Code: _____

PAYMENT INFORMATION

Month Covered: _____

Amount Paid: \$ _____

Payment Method: Cash Check Bank Transfer Other: _____

Check No. (if applicable): _____

Date Payment Received: _____

PAYMENT BREAKDOWN

Charge Type	Amount (\$)
Rent	
Water Bill	
Electricity Bill	
Maintenance	
Other Fees	

Total Paid	
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SIGNATURES

Received By (Landlord/Agent): _____

Signature: _____

Date: _____