

COMMERCIAL LEASE DEPOSIT RECEIPT

Receipt No: _____

Date: _____

LANDLORD / LESSOR	TENANT / LESSEE
Company: _____	Company: _____
Name: _____	Name: _____
Address: _____ _____	Address: _____ _____
Phone: _____	Phone: _____

LEASED PREMISES DESCRIPTION

Property Address: _____

Suite / Unit: _____ **Use of Premises:** _____

DEPOSIT DESCRIPTION	PAYMENT METHOD	AMOUNT RECEIVED
Security Deposit		\$
Holding Deposit		\$
First Month's Rent		\$
Other: _____		\$
Total Amount Received:		\$

The deposit payment(s) detailed above have been received by the Landlord/Lessor from the Tenant/Lessee as a deposit in connection with the commercial lease agreement for the premises described herein. This receipt is subject to the clearing of any check or electronic payment. The utilization, retention, and ultimate refund of these funds shall be strictly governed by the terms and conditions outlined in the executed Commercial Lease Agreement.

RECEIVED BY (SIGNATURE)
 Authorized Landlord Representative

PRINT NAME
 Date: _____

