Housing/Lease Agreement Summary

Leasee: _____

Landlord: _____

Dates of Agreement: _____ to _____

Property Address: _____

Monthly Rent: _____ Due on: _____

Utilities includes: ☐ Yes ☐ No

Receipt of Payment for Housing

Rent paid by: _____

Amount: _____ Dated Received: _____

Form of Payment: ☐ Cash ☐ Check #_____ ☐ Other: _____

_____ _____
Landlord: Printed Name Date

_____
Landlord: Signature

_____ _____
Leasee: Printed Name Date

_____
Leasee: Signature

☐ I certify that the above is a true statement of the housing expenses incurred by me in accordance with applicable STAR Program procedures. These expenses will not be reimbursed by any other funding source.