|  |  |
| --- | --- |
| Commercial Rent Receipt | |
| Date: |  |
|  | |
| Business Name: |  |
|  |  |
|  |  |
| Property Address: |  |
|  |  |
|  |  |
| Space Description: |  |
|  | |
| Landlord Name: |  |
|  | |
| Tenant Name: |  |
|  | |
| Amount Paid: |  |
|  | |
| Payment Period: |  |
|  | |
| Payment Method: |  |
|  |  |
| Signature: |  |
|  | |
|  | |