# Y:\NEW LOGO - Area Health Education Center\JPEG\Area Health Education Center.jpg

***Please scan/take a picture of the completed rent receipt***

 ***and send to*** ***ukahec@uky.edu***

***Also, please contact your housing host, prior to arrival, to arrange your arrival time and specifics regarding host payment.***

# RENT RECEIPT

# AREA HEALTH EDUCATION CENTER

# UNIVERSITY OF KENTUCKY

Received from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT/RESIDENT

Today’s Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rotation Dates/Location\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount Paid to Lessee\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LESSEE (Person Providing Housing)

LESSEE ADDRESS (Street, City, State, Zip)

LESSEE TELEPHONE #

**NOTE: The funds supplied by AHEC for rent are state money and any misuse is fraud. Any unused rent money must be returned to the AHEC office. NO RENT IS ALLOWED IF A STUDENT OR RESIDENT STAYS WITH PARENTS OR RELATIVES.**

**I AFFIRM THAT I HAVE RECEIVED THESE FUNDS AS RENT FROM THE STUDENT/RESIDENT.**

LESSEE SIGNATURE

**I AFFIRM THAT I HAVE PAID THESE FUNDS AS RENT TO THE LESSEE.**

STUDENT/RESIDENT