

Deposit Receipt

Date: _____

Receipt #: _____

Received From (Depositor):

Company/Individual Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Email Address: _____

Account Number (if applicable): _____

Received By (Recipient):

Name: _____

Address: _____

City, State, Zip: _____

Details of Transaction:

Amount Received: \$ _____

Payment Method: _____

Description/Purpose of Deposit:

Payment Owed: _____

Due Date: _____

Additional Terms and Conditions:

The deposit mentioned above is non-refundable unless otherwise specified in writing.

This deposit will be refunded upon

Any damages or outstanding balances will be deducted from the deposit amount.

Acknowledgment:

This receipt acknowledges that the Recipient obtained the deposit mentioned above from the Depositor in the amount of \$_____ on _____ for the purpose of _____. The parties understand and agree to the terms and conditions outlined in this Deposit Receipt.

Recipient's Signature: _____ Date: _____

Depositor's Signature: _____ Date: _____