



WASHINGTON
PARTIAL RENT PAYMENT RECEIPT



DATE _____ PROPERTY NAME / NUMBER _____
 RESIDENT NAME(S) _____
 _____ and all others.
 UNIT NUMBER _____ STREET ADDRESS _____
 CITY _____ STATE _____ ZIP _____

Resident understands that Owner/Agent is not required to accept late or partial payments of rent. Resident has asked Owner/Agent to accept a partial payment along with Resident's agreement to pay the balance due. Owner/Agent is willing to do so as an accommodation to Resident. Resident understands that accepting the partial payment and the payment agreement does not waive any of Owner/Agent's rights to terminate Resident's tenancy if payments are not made as agreed.

SAMPLE

Rent amount due: \$ SAMPLE SAMPLE
 Partial payment received: (\$ SAMPLE)
 Rent balance due: \$ SAMPLE
 Late fees: \$ SAMPLE
 Other: SAMPLE \$ SAMPLE
 Balance due: \$ SAMPLE

Resident agrees to pay the balance due as follows:

SAMPLE

DUE DATE	AMOUNT
SAMPLE	\$ SAMPLE
SAMPLE	\$ SAMPLE
SAMPLE	\$ SAMPLE

All payments must be received by Owner/Agent by 5:00 p.m. on each due date, time being of the essence. All payments must be made by money order or cashier's check.

If Owner/Agent has previously issued a termination notice for non-payment of rent (3-Day Notice to Pay or Vacate), acceptance of this partial rent payment does not waive Owner/Agent's right to terminate if Resident fails to pay the balance at the time set forth above. No new termination notice need be given if Resident fails to pay the balance at the time set forth above. Owner/Agent may commence proceedings for non-payment of rent if subsequent payments are not made on or before the stated date.

The signature of any one Resident to this agreement binds all Residents of the unit.

X _____ X _____
 RESIDENT DATE OWNER/AGENT DATE
 X _____ SAMPLE
 RESIDENT DATE ADDRESS
 X _____ SAMPLE
 RESIDENT DATE
 X _____ SAMPLE
 RESIDENT DATE TELEPHONE