



ROSARIO MARIN Secretary State and Consumer Services Agency Chairperson JOHN CHIANG

State Controller Board Member

MICHAEL A. RAMOS San Bernardino County District Attorney

Board Member

VCP Rental Agreement

Instructions: The landlord must complete this rental agreement in full.			JULIE NAUMAN Executive Officer
I,	(lessor/landlord), agree to rent a		
residence/room to	·	(lessee/claimant),	at the
following address:			
beginning,			
I require payment as foll	ows:		
\$	First month rent		
\$	Last month's rent, if applicable		
\$	Deposit, if applicable		
\$	Utility deposit, if applicable (e.g. electric/gas/water, but not to include cable)		
\$	Total due at the time of move in Paid by:Check Cash Money Order		
	is for rental of a room, a usidence is required.	itility statement with the	
		s of the State of California rect and complete to the	<u> </u>
Your signature designates	ou have read and agree with	the above statement.	
Signature (Landlord)		Date	
Payee:			
Telephone Number:			
Address:			
City/State/Zip			
Tax I.D. of Payee or Social	Security No.		

(Tax I.D. number same as registered with Internal Revenue Service)