

Commonwealth Real Estate Services
18150 SW Boones Ferry Road
Portland, OR 97224
(503) 244-2300
(503) 768-4660 Fax

**RECEIPT FOR FORM
STATEMENT OF POLICY 46**

The undersigned acknowledges receipt of the Statement of Policy and exhibits thereto for the facility whose name appears below. This is not a contract and signing it does not obligate the undersigned tenant or prospective tenant in any way.

The only purpose of this receipt is to prove the documents were delivered as required by Oregon law. If you are a prospective tenant and refuse to sign this receipt, the Landlord has the right to refuse to rent to you.

Name of Community

Tenant/Applicant
Print Name: _____

Date

Tenant/Applicant
Print Name: _____

Date