

Letter of Responsibility - Sample

Date _____

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I, _____, will be financially responsible for the lease
at _____ for my son / daughter, _____,
in the event they are unable to meet the lease obligations or cause damage to the property. By
signing below, I also grant permission for Mathers Realty, Inc. to obtain a credit report.
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Name: _____

Address: _____

Phone #: _____

Social Security #: _____

Signature

State of: _____

County of: _____

Subscribed and sworn to before me this ____ day of _____ of _____.

Notary Public

My commission expires _____

Sample Patient Financial Responsibility Letter

Clifford Lane



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