MOVE-OUT Deposit Refund Summary							
Building #:		Apartment #:			Name:		
Lease term: or Sublease					oleased in ((which month/year):	
Returned Items: # Keys:		# Scanner:			# Remote:		
MissKey deduction:				\$			
Damages and deductions:							
Damaged wall painting fee				\$			
(Deep) Cleaning fee				\$			
Wood floor damage				\$			
Master bedroom				\$			
Guest bedroom 1 or 2			r 2	\$			
Living room				\$			
Dining area				\$			
Other damages:			\$				
Original deposit:				\$			
Credit on file:				\$			
Deductions in total (keep on file):				\$			
Deposit refund che	eck amout:			\$			
1.Send to Forwarding ADDRESS (IN CAPS):							
2. Pick Up at Office				Yes/	No		
We agree to all above deductions and deposit refund, signed by							
Print name:					Signature	:	Date:
Original Tenants:							
New Tenants:							