## **Colorado Area Health Education Center Housing Program**

AMC, UCCS, and UCFC Health Profession Students



## **COAHEC Official Rent Receipt**

## Instructions:

- Fill this form out completely. Incomplete forms will be returned.
- If there is no landlord, i.e., Airbnb or hotel accommodations payment receipts must accompany this form.
- Email the completed form and supporting documentation to COAHECHousing@cuanschutz.edu with "STUDENT-FOUND REIMBURSEMENT\_-\_STUDENT'S LAST NAME" in the subject line.
- This receipt must be received in the COAHEC program office at COAHECHOUSING@cuanschutz.edu within 45 days of the last date of your rotation.

Note: Landlords are requested to provide students who have paid rental expenses during rural rotations with a completed and signed receipt. Please make sure to enter the actual amount paid by the student. This receipt is required for students to receive reimbursement for rental expenses.

Date:		
•	rudent whose name is mentioned below	•
(Enter the total amount paid)	for# of nig	
First night of housing:	Last night of	housing:
Landlord Signature:		
Landlord Contact Information: (This may or may not be the address the student stayed (All information below is required.) PLEAS	E PRINT	
City:	State:	Zip:
Phone:	Email:	
night. This receipt must be received in		l actual rotation dates only) for actual costs of up to \$23.00 per G@cuanschutz.edu within 45 days of the last date of your rotatio led).
Student Contact Informatio (All information below is required.) PLEAS		
Name:		
	State:	Zip: