EVICTION NOTICE

30-Day Notice to Pay Rent or Quit

, 20					
To:					
Rental Address:					
YOU ARE HEREBY NOTIFIED THAT,	, under the terms of:	(Check one)			
☐ Your tenancy (if no original agreem	ent)				
☐ The Lease Agreement dated	, 20				
☐ The Rental Agreement dated	, 20				
☐ The Residential Lease Agreement d	lated,	20			
□ Other:					
(the "Lease") for the rent and use of the	e premises listed abo	ove now occup	pied by you:		
Your rent for the period fromowe the following amounts:	, 20 to	, 20	_ is PAST DUE. /	Accordingly, yo	
Rent past due:	\$	_			
Late fee:	\$	_			
Total Amount Past Due	\$				

I demand payment in full of the total amount past due within thirty (30) days from the date of delivery of this notice. UNLESS PAYMENT IS MADE BY SUCH DATE, THE LEASE WILL BE TERMINATED AND YOU MUST VACATE THE PREMISES. You are further notified that unless you pay the total amount past due or vacate the premises by such date, legal action may be initiated against you.

THIS NOTICE IS PROVIDED TO YOU IN ACCORDANCE WITH THE LEASE AND WISCONSIN STATUTES 704.17(3). NOTHING IN THIS NOTICE IS INTENDED OR SHALL BE CONSTRUED AS A WAIVER BY THE LANDLORD OF ANY RIGHTS OR REMEDIES THE LANDLORD MAY HAVE UNDER THE LEASE OR UNDER STATE OR FEDERAL LAW.



Signature	Date	
Landlord's Contact Information:		
Name:		
Address:		
Phone Number:		



PROOF OF SERVICE

	declare under penalty of perjury under the laws of the 20, I served a true copy of the attached Notice of
□ Personal delivery to	_ at the following address:
☐ Substituted delivery left with/at	at the following address:
	·
☐ Registered mail, return receipt requested to	at the following address:
☐ Certified mail, return receipt requested to	at the following address:
Signed by:Print Name:Date:	

