

Paul A. Hinshaw
1116 Wilkes Boulevard
Columbia, Mo. 65201
(573) 449-6933

(Please Print Clearly)

Parent or Guardian	Parent or Guardian
Name _____	Name _____
Address _____	Address _____
_____	_____
Phone _____	Phone _____
Email _____	Email _____
S.S.# _____	S.S.# _____

Employer / Occupation	Employer / Occupation
Name _____	Name _____
Title _____	Title _____
Length at Company _____	Length at Company _____
Address _____	Address _____
_____	_____
Phone _____	Phone _____

WE THE UNDERSIGNED,
Will be responsible for any financial obligation incurred by _____
for rent, late fees, cleaning, repairs, damages pertaining to any lease agreement entered into within 60
days hereafter in Columbia, Missouri with HINSHAW FAMILY PARTNERSHIP, a Limited Partnership, or
PAUL A. HINSHAW.

Signed _____ Signed _____

Date _____ Date _____

State of _____ County of _____

I _____ a Notary Public, in and for the County aforesaid, do hereby certify that
_____ personally appeared before me in said County, the said being
personally well known to me as the person who executed the said deed, and acknowledge the same to be his act
and deed.

Notary Public
(Seal)
My commission Expires _____

Signed _____ Date _____

***Do not fax this form, the original is required. Please mail to above address.**