## RENTAL INCOME AND EXPENSES

NAME		ID#			
ADDRESS/LOCATION OF PROPE					
OWNERSHIP (H, W, J) ANY PERSONAL USE?					
IF OWNER OCCUPIED, PLEASE	PROVIDE:				
Total Number of Squ	are Feet in Entire Structure:				
	are Feet Used 100% by Ter	nants:	Total Rent	Security Depo	seit.
INCOME Tenant's Na	ame				
EXPENSES	AMOUNT	EXPENSES			AMOUNT
Advertising		Supplies			1
Auto & Travel		Miscella	neous		
Miles		Office	neous		-
Food		Postage			-
Hotel	Taxes				+
Cleaning & Maintenance			Real Estate		
Supplies			City Fees		
Equipment Rental		Utilities			+
Snow Removal		Electric			
Yard Work			Garbage		-
Commissions/Management Fees		Heat			+
Insurance	Telephone				+
Interest		Water/Sewer			-
Building	Water/Sewer				+
Improvements	Wages/Salaries			+	
Equipment	Wages/Salanes Other (List)				+
Legal and Accounting Fees		Outer (List)			-
Repairs					-
Carpentry					-
Electrical					+
Painting/Decorating	TOTAL				
»»» CHECK LAST YEAR'S		DULE TO BE SU	RE ALL ITEMS	ARE CURRE	NT ««««
MAJOR PURCHASES AND IMPR	OVEMENTS				
Item Purchased	Date Purcha	sed Cost (Inclu	ding Sales Tax)	New/Used	Item Traded
ALES OR OTHER DISPOSITION:	S				
Item Sold	Date Sold	Selling Price	elling Price Expenses Date Acquired		Cost
			-		
		1			
uestions:					