

Statement of Real Estate Rentals

Name: _____

Address: _____

For the Period (MM-DD-YY) _____ to _____

Income:

Address of Unit: _____

Total Rental Income:

Expenses:

Advertising

Insurance

Interest

Office expenses

Legal, accounting & other professional fees

Management and administration fees

Repairs & maintenance

Salaries, wages, and benefits (including employer's contributions)

Property taxes

Travel

Utilities - light, heat, water

Other expenses (list):

Total Deductible Expenses:

Net Income (Loss) before Accountant's Adjustments:

Details of Co-Owners/Partners (if applicable):

Full Name(s):	S.I.N.	% Ownership

PLEASE PROVIDE OUR OFFICE WITH A PHOTOCOPY OF ANY CAPITAL PURCHASE OR SALE INVOICE.