



By signing above, I acknowledge the amounts shown on this worksheet were provided by myself and are a true and accurate representation of my deductions / expenses this year.

Name: _____ Year: _____

	PROPERTY #1	PROPERTY #2	PROPERTY #3
Property Address	_____	_____	_____
City, State & Zip	_____	_____	_____
Property Type	_____	_____	_____
Purchase Price \$	_____	\$ _____	\$ _____
Date Started Renting	_____	_____	_____
No. Days Rented in Yr	_____	_____	_____
Distance from home to rental	_____	_____	_____
Number of trips to rental	_____	_____	_____

INCOME

Annual Total Rent \$	_____	\$ _____	\$ _____
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Primary Expenses

Advertising	\$ _____	\$ _____	\$ _____
Out of State Travel	\$ _____	\$ _____	\$ _____
Cleaning	\$ _____	\$ _____	\$ _____
Commissions	\$ _____	\$ _____	\$ _____
Insurance (Mortgage)	\$ _____	\$ _____	\$ _____
Insurance (Hazard)	\$ _____	\$ _____	\$ _____
Legal & Professional Fees	\$ _____	\$ _____	\$ _____
Management Fees	\$ _____	\$ _____	\$ _____
Mortgage Interest	\$ _____	\$ _____	\$ _____
Repairs	\$ _____	\$ _____	\$ _____
Supplies	\$ _____	\$ _____	\$ _____
Property Taxes	\$ _____	\$ _____	\$ _____
Utilities (Elec, Gas & Water)	\$ _____	\$ _____	\$ _____

Depreciation Expenses

Appliances	\$ _____	\$ _____	\$ _____
Home Renovations	\$ _____	\$ _____	\$ _____
Landscaping	\$ _____	\$ _____	\$ _____

Other Expenses

Alarm Service	\$ _____	\$ _____	\$ _____
Association Dues	\$ _____	\$ _____	\$ _____
Home Warranty	\$ _____	\$ _____	\$ _____
Lawn Maintenance	\$ _____	\$ _____	\$ _____
Pest Control	\$ _____	\$ _____	\$ _____
Pool Service	\$ _____	\$ _____	\$ _____
Sewer	\$ _____	\$ _____	\$ _____
Trash	\$ _____	\$ _____	\$ _____
MISC	\$ _____	\$ _____	\$ _____
MISC	\$ _____	\$ _____	\$ _____
MISC	\$ _____	\$ _____	\$ _____

TOTALS

TOTAL EXPENSES	\$ _____	\$ _____	\$ _____
NET INCOME OR LOSS	\$ _____	\$ _____	\$ _____