

Client name:	income reported jointly?	Yes No
If Yes with whom:		
Rental address		Postal Code
Rental address Is this	s the final year of your ren	tal operation? Yes No
Was any of this property personal use during the tax year Yes No		
Gross Rents	\$	
Other income from property	\$	
Expenses:		
Advertising		\$
Insurance		\$
Interest and Bank Charges		\$
Office Expenses		\$
Professional fees (legal and accounting)		\$
Management and Administration fees		\$
Repairs and Maintenance (do not include cap	ital improvements)	\$
Salaries/ Wages / Benefits		\$
Property Taxes		\$
School Taxes		\$
Travel		\$
Utilities		\$
Other expenses:		
		\$
		\$
		\$
		\$
Note if you have Capital Improvement expenses please provide details on the back of this sheet  If you have motor vehicle expenses, please provide information and details on back of sheet		
Notes:		