

Name: _____

Tax Year: _____

Rental Property

Property Type (single family, etc.)	Property Address
1	
2	
3	
4	

Income & Expenses	1	2	3	4
Number of Available Rental Days				
Income (Rent received)				

Advertising				
Auto/Travel (Check on Property)				
Cleaning & maintenance				
Commissions				
Insurance				
Legal and Professional Fees				
Management Fees				
Mortgage Interest paid				
Other Interest Paid				
Repairs				
Supplies				
Taxes - Real Estate				
Utilities				
Other - Cell Phone (Total & Bus %)				
Other - Contractors				
Other - Credit Checks				
Other - Homeowner Association				
Other - Lawn Care				
Other				

New Purchases	Date	Cost	Description	Property #
Building and Land				
Closing costs				
Property Improvements				
Appliances				