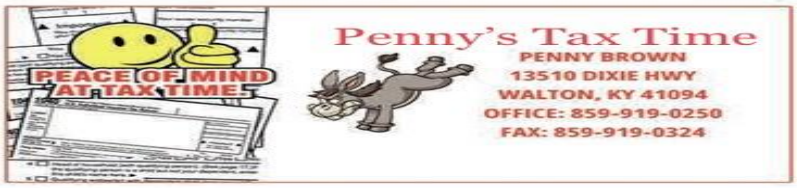
RENTAL PROPERTY

Please Give Totals
Save Receipts



Revenue

TOTAL INCOME	(1099 INCOME)	
RETURNS / ALLOWANCES	LOSS OF RENTS	

PROPERTY ADDRESS_____SINGLE/MULTI/VAC./COMMERCIAL

Cost of Goods Sold

SUPPLIES	

Expenses

ADVERTISING		
COMMISSIONS / FEES	(MANAGEMENTS)	
CONTRACT LABOR	(HIRE OUTSIDE HELP)	
INSURANCE (NOT health)		
INTEREST - MORTGAGE	(MORTGAGE FOR BUSINESS)	
INTEREST - OTHER	(CREDIT CARD/LOANS	
LEGAL / PROFESSIONAL SERVICE		
OFFICE EXPENSE		
REPAIRS	(MADE TO HOME)	
RENT - VEHICLE / EQUIP.		
CLEANING		
TAXES / LICENSE	(SALES, OCCUPATIONAL)	
TRAVEL	(HOTEL STAY/FLIGHT)	
MEALS		
UTILITIES - Electric, Water, Trash		
CELL PHONE		
INTERNET		
OTHER EXPENSE		
MILEAGE	(NOT CLAIMING FUEL/REPAIR)	
FUEL		
REPAIRS/MAINTENANCE	(ONLY IF CLAIMING FUEL)	
TYPE EQUIP. PURCHASE	**DATE & COST**	
_____	_____	
_____	_____	
_____	_____	
_____	_____	
_____	_____	
_____	_____	

DID YOU ISSUE A 1099 TO ANYONE? YES OR NO

BUSINESS NAME_____

STATE ESTABLISHED_____ **DATE ESTABLISHED**_____

Do you need Occupational License?
County?_____
City?_____

LLC, PARTNER, S-CORP, INC.?
EIN #_____
Org#_____LLET#_____