



Income Expense Summary

Property Address: _____

Annual Income	Year Beforelast	Last Year	Year To Date 1/1 To
Actual Rents Collected			
Laundry Income			
Garage Income			
Other Income			
Total Income Collected			
Fixed Annual Expenses			
Real Estate Taxes			
Other Taxes And Assessments			
Insurance			
Licenses			
Other			
Operational Expenses			
Fuel/gas			
Electricity			
Water & Sewer			
Trash Removal			
Cable Tv			
Pest Control			
Building Maintenance & Repairs			
Interior & Exterior Decorating			
Cleaning Expenses			
Supplies			
Pool Service			
Elevator Maintenance			
Parking Area Maintenance			
Gardening			
Non-resident Management			
On-site Management			
Advertising/telephone/bank Charges			
Legal & Audit			
Other			
Replacement Reserves (Non-recurring Expenses)			
Carpet/drapes/blinds			
Appliances/furniture			
Heating & Air Conditioning			
Roof			
Other			
Total Expenses & Replacement Reserves			

Apartments Only — If Master Metered, Please Indicate. Yes No

I/we Fully Understand That It Is A Federal Crime Punishable By Fine Or Imprisonment, Or Both, To Knowingly Make Any False Statements Concerning Any Of The Above Facts As Applicable Under The Provisions Of Title 18, United States Code, Section 1014.

By: Borrower/seller _____ Date _____

By: Borrower/seller _____ Date _____