



RENTAL INFORMATION (SCHEDULE E)

Property Type: _____ Value of Property: _____

Days Rented: _____ Days of Personal Use: _____ Date Placed in Service: _____

Full Street Address: _____

Rent Received

1099: _____ Cash: _____

EXPENSES

Advertising		Cleaning	
Bank Charges		Repairs	
Commissions		Maintenance	
Insurance		Utilities	
Management Fees		Other Expenses	
Mortgage Interest		Other Interest	
Supplies		Legal Expenses	
Phone Expense		Taxes	

Vehicle Expense

Vehicle Type: _____ Purchase Date: _____ Cost of Vehicle: _____

Business Miles Driven: _____ Total Miles Driven: _____ Date Placed in Service: _____

Do you have written records to support miles? Yes ☐ No ☐

Parking & Tolls		Tires/Repairs		Loan Interest	
Gas & Oil		Insurance		Taxes	

Office in home

Sq. Ft. Used for Business: _____ Total Sq. Ft. of Home: _____

We will prepare your tax return from the information you've furnished. Upon examination, taxing authorities may request copies of supporting documents, therefore preserve all records for which you may be called upon to produce.

I certify that the information on this and any other form submitted is complete and correct.

Signature: _____ Date: _____