

# Peter Harasymchuk Inc.

Certified Management Accountant

## Rental Income

Name \_\_\_\_\_ Year: \_\_\_\_\_

Address \_\_\_\_\_

If part of your principle residence: Square foot of rental \_\_\_\_\_

Square foot of building \_\_\_\_\_

Please answer the following:

Purchase any capital items this year? \_\_\_\_\_

How many owners? \_\_\_\_\_

Is it the first/last year of ownship? \_\_\_\_\_

### Income

Gross rental income \_\_\_\_\_

### Expenses

Advertising \_\_\_\_\_

Automotive \_\_\_\_\_

Insurance \_\_\_\_\_

Interest \_\_\_\_\_

Management fees \_\_\_\_\_

Office expense \_\_\_\_\_

Professional fees \_\_\_\_\_

Property taxes \_\_\_\_\_

Salaries, wages and benefits \_\_\_\_\_

Strata fees \_\_\_\_\_

Travel \_\_\_\_\_

Utilities \_\_\_\_\_

Other: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Attach all relevant documentation.