



Rental Deduction Form

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Tax Year	_____	Phone Number	_____
Full Name (s)	_____	Email	_____
Rental Address	_____		_____
Type of Rental	Please Select a Type		

Rent Received _____ **Rental Days** _____ **Personal Days** _____

Expenses

Other Expenses

Advertising _____

Cleaning and Maint.

Air Filters _____

Carpet Cleaning _____

Locks _____

Paint _____

Other _____

Total \$ 0

Commissions _____

Insurance _____

Legal and Prof. Fees _____

Management Fees _____

Mortgage Interest _____

Other Interest _____

Alarm _____

Gardener _____

HOA Dues _____

Landscaping _____

Other Travel Expenses _____

Pest Control _____

Refinancing Points _____

Other _____

Mileage To and From Rental

Repairs

A/C and Heating Unit _____

Carpet Replacement _____

Plumbing _____

Roof _____

Supplies _____

Water Heater _____

Other _____

Total \$ 0

To Collect Rent _____

To Do Repairs _____

To Get Supplies _____

To Meet Tenant _____

Other _____

Total 0

Property Taxes _____

Utilities

Cable / Internet _____

Electricity _____

Gas _____

Telephone _____

Water _____

Other _____

Total \$ 0

Reset Form