



## Income & Expenses

Building Name \_\_\_\_\_

Item	3rd Preceding Year	2nd Preceding Year	Preceding Year	YTD No. / Months _____	Trailing 12 Months	Adjustments	Final	Notes
Avg. Daily Rate (ADR)								
Room Revenue								
<b>Occupancy (ADO) %</b>								
Food & Beverage								
Telephone Revenue								
Other Departmental								
Other Income								
<b>Departmental</b>								
Room Expenses								
Food & Bev. Expenses								
Telephone Expenses								
Other Dept. Expenses								
Total Dept. Expenses								
<b>Departmental Income</b>								
Real Estate Taxes								
Property Insurance								
Utilities								
Repairs and								
Franchise Fees								
Management Fees								
Payroll and Benefits								
Advertising and								
Professional Fees								
General and								
Other Expenses								
Ground Rent								
<b>Total General</b>								
<b>Total Expenses</b>								
Operating Expense								
<b>Net Operating Income</b>								
FF&E / Cap. Ex.								
Extraordinary Capital								
<b>Total Capital Items</b>								
<b>Net Cash Flow</b>								