



# Rent Roll

Building Name \_\_\_\_\_ Rent Roll Date \_\_\_\_\_

No.	Tenant Name	Suite #	Tenant Type	Leased Area	Annual Rent	Lease Start	Lease Expire	Occupied Since	Options/Term	Borrower Affiliated Y/N	Reimbursements: Y / N			
											Utilities	Taxes	Insurance	Mgmt.
1									/					
2									/					
3									/					
4									/					
5									/					
6									/					
7									/					
8									/					
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22									/					
23									/					
24									/					
25									/					

## Income & Expenses

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

Item	3rd Preceding Year	2nd Preceding Year	Preceding Year	YTD No. / Months _____	Trailing 12 Months	Adjustments	Final	Notes
Base Rent								
Expense Reimbursements								
Percentage Rent								
Parking Income								
Other Income								
Vacancy & Coll. Loss								
<b>Effective Gross Income</b>								
Real Estate Taxes								
Property Insurance								
Utilities								
Repairs and Maintenance								
Janitorial								
Management Fees								
Payroll and Benefits								
Advertising and Marketing								
Professional Fees								
General and								
Other Expenses								
Ground Rent								
<b>Total Operating</b>								
<b>Net Operating Income</b>								
Leasing Commissions								
Tenant Improvements								
Cap Ex. (Repl. Reserves)								
Extraordinary Capital Exp.								
<b>Total Capital Items</b>								
<b>Net Cash Flow</b>								