CLEAR

ABO Capital

Property Operating Statement

Business Real Estate Financing

Note: Only required to be completed for Investment property.

Applicant Name:_____ Phone Number:_____

Complete Address of Collateral Property

Street		
City	State	ZIP Code
Period (Year or Interim)		

INCOME:

Total Annual Rents Received	
Other Annual Income (parking, billboards, laundry, etc.)	
Total Potential Gross Income (PGI)	**0.00**
Vacancy and Collection Loss 5 (%)	**0.00**
EFFECTIVE GROSS INCOME (EGI):	**0.00**

EXPENSES:

Advertising	
Auto and travel	
Cleaning and maintenance	
Commissions	
Insurance	
Legal and other professional fees	
Management fees	
Repairs	
Supplies	
Real Estate Taxes	
Utilities	
Other	
TOTAL EXPENSES:	**0.00**
Total Net Operating Income:	**0.00**

Signature:_____ Date:_____ (mm/dd/yyyy)

Signature:_____ Date:_____ (mm/dd/yyyy)