

REAL ESTATE RENT ROLL	Property Address:	City, State, Zip:
	Property Owner:	Phone Number:
	Owner Address:	City, State, Zip:
		Expenses Paid By Tenant

Property Address	Unit No.	Tenant Name (or state "Vacant")	Square Feet	Monthly Base Rent	Monthly CAM Charge	Original Lease Start Date	Current Lease Start Date	Current Lease Expiration Date	Gas	Electric	Water	Garg.	Maint.	Insur.	Taxes
TOTALS:			-	-	-										

CERTIFICATION. The undersigned hereby certifies that he/she is the/an owner of the Property(s) listed herein or an authorized representative of the/an owner, that the information herein is true and correct, and that no tenant is currently delinquent in payments of any rent except as specifically indicated herein or in an attached statement.

Authorized Signature: _____

Name (print): _____

☐ Sent by email

Title (if applicable):

Date: _____