

Borrower(s):_____ Property Address:_____ PSB Loan #:_____

Operating Statement (P&L)

Months (covered by P & L)

Year

ncome			
Gross rent			
CAM Reimbursements			
Laundry Income			
Other Income			
Effective gross income			
Operating expenses			
Accounting, legal			
Advertising			
Alarm, security			
Cleaning			
Elevator maintenance			
nsurance			
Landscaping			
License, permits			
Maintenance, repairs			
Management On-Site			
Management Off-Site			
nterior and Exterior Decorating			
Pest control			
Pool maintenance			
Postage, delivery			
Property taxes			
Supplies			
Telephone			
Electric			
Gas			
Frash removal			
Water			
Capital expenditures			
Other expenses			
Total operating expenses			
Net operating income			

Please list all non-recurring operating expenses below:

I (We) certify under penalty of perjury that the foregoing information contained herein is true and accurate to the best of my (our) knowledge.

Borrower Signature:	 Date:

Borrower Signature: _____

Date: ___



Provident Savings Bank, F.S.B., NMLS# 449980