## FRANKFORT TOWNSHIP ASSESSOR Joseph N. Kral, C.I.A.O.

11000 W. Lincoln Hwy. Frankfort, Illinois 60423 815-464-3180 Phone 815-464-3182 Fax

www.frankfortassessor.com

## **Last Three Years - Income & Expense Analysis**

PIN: Subject Property Address:

	20	20	20_	YTD	Annualized	Stabilized	]
INCOME							
Vacancy & Loss							
Expenses							]
Utilities							]
Repairs							
Professional Fees							]
Mgmt.Fees/Salaries							
Independent Vendors							]
Miscellaneous							]
Reserves							]
NET OPERATING INCOME							
Cap & Load							]
FAIR MARKET VALUE							
ASSESSED							1
VALUATION							
STATE OF ILLINOIS COUNTY OF WILL							
Ι,		, being first d	uly sworn, stat	e that I am an	owner, partner		
and/or joint venturer, of	real estate taxes	for the year 2025	relating to the r	real estate wh	ich is the subject of the	e above property inde	ex number and have personal
1. That a Federal Inco expense statement for the year correct copy of which statement	2024/2025 with	reference to this	real property wi	hich will be in	as been, or will be, suncorporated in this tax	bmitted to the taxpay payer's 2025 Federal	er's preparer an income and I Income Tax return a true and
properties for prior years have the above real estate taxpayer's and correct copies of which are	been and for 202 s preparer the inceattached hereto	25, will be, consolone and expense and bear my sign	lidated on taxpa e statements relature; that ther	axes on more ayer's federal ating to this p e has been or	income tax return; the roperty for incorporat will be submitted to the	at for years prior to 20 ion in the taxpayer's his taxpayer's prepare	me and expenses for these 025 there have been submitted to federal income tax returns, true er an income and expense tatement is attached hereto and
			(check ap	plicable state	ment)		
Subscribed and sworn to before	e me,						
Thisday of	,20						
Notary Pub	lic		Owner				
1.1.1.1.1					FT	7-32808-1	