

**SCHEDULE D -LEASED OR RENTED EQUIPMENT (PRINTED)**

Account #

Tax Year

**2021**

Name and Address of Lessor	Description	QTY	Date and Term of Lease	Cost at Beginning of Lease / Annual Rent
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EXAMPLE

Name of Lessor	Description	QTY	Date	Cost at Beginning
<b>ABC LEASING</b>	<b>DENTAL LASER</b>	<b>1</b>	<b>12-20-20</b>	<b>49179</b>
Lessor Address				
<b>123 North Pole Cr. Suite 222 Salt Lake City, UT 88888</b>			Term	Annual Rent
Lease Agreement #			<b>60 MOS</b>	
<b>123456789</b>				

Name of Lessor	Description	QTY	Date	Cost at Beginning
Lessor Address				
			Term	Annual Rent
Lease Agreement #				

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Lessor Address				
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Lease Agreement #				

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