





Renter/Unit Information

Venkata Ravi Kumar		Duddula				
Renter First Name and Initial		Renter Last Name		Electronic Certificate Nun	Electronic Certificate Number (ECN)	
13050 Dahlia Circle Rental Unit Address	****		219 Unit	01/01/2022 Rented from (MM/DD/YY	12/31/2022 YY) to (MM/DD/YYYY)	
Eden Prairie	MN	55344	Hennepin	12	2	
City	State	ZIP Code	County	Total Months Rented	Total Adults Living in Unit	
Property Information Place an X if the property is:						
[1] Adult Foster Care [2] Assisted Living [3] Intermediate Care Facility				2211622110005		
				Property ID or Parcel Number		
(4) Nursing Home	(5) Mobile	Home (5) Mobile Home Lot		Number of Units on This P	508	
2 Caretaker rent reduction (see in	structions)		E No Come Properties	2 🔳 _	\$10,517.00 \$0.00 \$10,517.00	
Property Owner FPACP3 Eden, LLC Property Owner Name				(952) 777-7112 Daytime Phone		
13000 Garden Lane			Eden Prairie	MN 55344		
Property Owner Address			City	State ZIP Code		
Sign Here	and comple	ete to the best of my kr	nowledge and belief.			
Owner or Agent Signature		0		01/18/2023 Date (MM/DD/YYYY)		
FPACP3 Eden, LLC		(952) 777-7112				
Managing Agent Name, If Applicable (plea	se print)			Daytime Phone		
Renter Instructions						

Use this certificate to complete Form M1PR, Homestead Credit Refund (for Homeowners) and Renter's Property Tax Refund. When you file Form M1PR, you must attach all CRPs used to determine your refund. Keep copies of Form M1PR and all CRPs for your records.

Note: The property owner or managing agent must give each renter living in a unit a separate CRP showing that they paid an equal portion of the rent, regardless of the portion actually paid.

For forms and tax-related information, go to our website at www.revenue.state.mn.us, or call 651-296-3781 or 1-800-652-9094.





2022 CRP, Certificate of Rent Paid

Renter/Unit Information

Lakshmi Neelima	Duddula						
Renter First Name and Initial	Renter Last Name		Electronic Certificate Number (ECN)				
13050 Dahlia Circle		219	01/01/2022 12/31/2022				
Rental Unit Address		Unit	Rented from (MM/DD/YYYY) to (MM/DD/YYYY)				
Eden Prairie MN	55344	Hennepin	Total Months Rented Total Adults Living in Unit				
City State	ZIP Code	County	Total Months Rented Total Adults Living in Unit				
Property Information Place an X if the property is: [1] Adult Foster Care [2] Assisted	Living (3) Intermed	diate Care Facility	2211622110005				
			Property ID or Parcel Number 508				
(4) Nursing Home (5) Mobile	Home (6) Mobile H	Home Lot	Number of Units on This Property				
A. Was any rent paid by Medical Assistance (see instructions)? B. Did the renter receive Minnesota Housing Support (formerly GRH)(see instructions)? (A) Yes No If yes, enter amount: A Total Rent							
1 Renter's share of rent paid (see instructions		\$10,517.00					
2 Caretaker rent reduction (see instructions)		2 ■ \$0.00					
3 Total rent (Add lines 1 and 2)			\$10,517.00				
Property Owner							
FPACP3 Eden, LLC		(952) 777-7112					
Property Owner Name			Daytime Phone				
13000 Garden Lane		Eden Prairie	MN 55344				
Property Owner Address		City	State ZIP Code				
Sign Here I deplace that this certificate is correct and complete	te to the best of my knowled	dge and belief.					
Owner or Agent Signature		01/18/2023 Date (MM/DD/YYYY)					
FPACP3 Eden, LLC		(952) 777-7112					
Managing Agent Name, If Applicable (please print)	Daytime Phone						
Renter Instructions Use this certificate to complete Form M1PR, Ho must attach all CRPs used to determine your ref Note: The property owner or managing agent m	fund. Keep copies of Form	M1PR and all CRPs for your reco					

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