

BUSINESS PROFIT/LOSS STATEMENT

Type: \_\_\_\_\_

- 1. Gross Receipts or Sales \_\_\_\_\_
- 2. Cost of Goods Sold \_\_\_\_\_
- 3. Gross Profit (subtract line 2 from line 1) \_\_\_\_\_
- 4. Other Income \_\_\_\_\_
- 5. Gross Income (add lines 3 and 4) \_\_\_\_\_

EXPENSES (do not list Chapter 13 Plan payment)

- 6. Business Property Rent/Lease \_\_\_\_\_
- 7. Salaries and Wages of Employees \_\_\_\_\_
- 8. Employee Benefits \_\_\_\_\_
- 9. Equipment Lease Payments \_\_\_\_\_
- 10. Depreciation Expense \_\_\_\_\_
- 11. Supplies \_\_\_\_\_
- 12. Utilities \_\_\_\_\_
- 13. Telephone \_\_\_\_\_
- 14. Repairs and Maintenance \_\_\_\_\_
- 15. Miscellaneous Office Expense \_\_\_\_\_
- 16. Advertising \_\_\_\_\_
- 17. Travel and Entertainment \_\_\_\_\_
- 18. Professional Fees \_\_\_\_\_

Name: \_\_\_\_\_ Purpose \_\_\_\_\_

- 19. Insurance
  - 19(a). Liability \_\_\_\_\_
  - 19(b). Property \_\_\_\_\_
  - 19(c). Vehicle \_\_\_\_\_
  - 19(d). Worker's Compensation \_\_\_\_\_
  - 19(e). Other \_\_\_\_\_
  - Total \_\_\_\_\_
- 20. Taxes
  - 20(a). Payroll \_\_\_\_\_
  - 20(b). Sales \_\_\_\_\_
  - 20(c). Other \_\_\_\_\_
  - Total \_\_\_\_\_
- 21. Total Expenses (add lines 6 through 20) \_\_\_\_\_
- 22. TOTAL PROFIT OR (LOSS) \_\_\_\_\_  
(subtract line 21 from line 5)