

Monthly Profit and Loss Statement

Month: _____

Name: _____ Case # _____

EXPENSES	TOTALS
1. Gross Receipts or Sales	\$
2. Cost of Goods sold	\$
Gross Profit (1 minus 2 =)	
3. Net Employee Payroll (excluding debtor)	\$
4. Payroll taxes	\$
5. Unemployment taxes	\$
6. Workers Compensation	\$
7. Other Taxes	\$
8. Inventory Purchases	\$
9. Purchase feed/fertilizer/etc.	\$
10. Rent (other than the debtors residence)	\$
11. Utilities	\$
12. Office Expenses and supplies	\$
13. Repairs and Maintenance	\$
14. Vehicle Expenses	\$
15. Travel and Entertainment	\$
16. Equipment rental and Leases	\$
17. Legal/Accounting/Other professional fees	\$
18. Insurance	\$
19. Employee Benefits (pension, medical, etc.)	\$
20. Direct payments (secured business creditors)	\$
Describe:	
21. Other expenses	
Describe:	
Total Net Income - Total Expenses	\$