PROFIT LOSS STATEMENT

FOR TAX YEAR ENDING DECEMBER:_____

BUSINESS NAME: _____

BUSINESS TYPE: _____

EIN NUMBER: _____

BUSINESS ADDRESS: _____

CITY:_____. STATE:_____

INCOME	
GROSS RECEIPTS	$
GROSS SALES	$
OTHER	$

EXPENSES

Advertising		**Vehicle:**	
Car and Truck Expense		Make	
Commission and fees		Model	
Contract Labor		Year	
Depreciation		Total Mileage	
Insurance other than Health		Business Mileage	
Interest		Ending Mileage	
Legal & Professional Services		Beginning Mileage	
Travel		Cost of Vehicle	
Business Telephone		Date Purchased	
Rent		Date Placed in Service	
Supplies		Gas	
Utilities		Insurance	
Wages		Repairs	
Taxes and License		Other Expense:	
Misc Expense:			

Tax Payer/Business Owner Acknowledgement:

I,_____hereby acknowledge that all financial information contained in this document are true representation of my/our business operations. I am/we are responsible for any income and expense misrepresentation

SIGNATURE:_____ DATE: _____