PROFIT & LOSS STATEMENT

BK Case #:	Period Covered: Ex. (Jan 2020 or Jan-Jun 2020)	
Name of Debtor/s:	Name of Business:	
INCOME		TOTALS
1. Gross Receipts or Sales		\$
2. Cost of Goods Sold		\$
a) Materials & Supplies		Ť
b) Labor Costs (but not employee wages, they g	o below)	
c) Other	,	
3. Gross Profit (subtract line 2 from line 1)		\$
4. Other Income (Describe)		\$
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5. Gross Income (add lines 3 and 4)		\$
EXPENSES		TOTALS
6. Rent or Lease		\$
7. Employee Wages		\$
8. Employee Benefits		\$
9. Equipment Lease Payments		\$
10. Secured Debt Payments		\$
11. Supplies (not inclusive 2a)		\$
12. Utilities		\$
13. Phone		\$
14. Repairs/Maintenance		\$
15. Advertising		\$
16 Travel & Entertainment		\$
17. Professional Fees (describe- example, lawn care or accountant)		\$
18. Insurance		\$
a. Liability		
b. Property		
c. Vehicle		
d. Worker's Comp		
e. Other		
19. Other Expenses (describe)		\$
20. Taxes		\$
a. Payroll		
b. Sales		
c. Other		
21. Total Expenses (add lines 6-20)		\$
TOTAL PROFIT (LOSS) (subtract line 21 from line 5)		\$
		

I/We declare under penalty of perjury that the information provided above is true and correct to the best of my/our knowledge, information and belief.

Print:	Sign:	Date:
Print:	Sign:	Date: