INCOME & EXPENSES

NAME OF BUSINESS_____

PHONE_____ **EMAIL**_____

INCOME:

REVENUE/SALES	
DEC 31 CHECKING BALANCE*	

RETURNS	

***FOR CORPORATIONS OR LLCS**

RETAIL INFO:

PURCHASES FOR RESALE	

JAN 1 INVENTORY	
DEC 31 INVENTORY	

EXPENSES:

ADVERTISING	
AUTO EXPENSES/MILEAGE	
WAGES	
CONTRACT LABOR	
EQUIPMENT	
INSURANCE (NOT HEALTH)	
INTEREST	
PROFESSIONAL SERVICES	
OFFICE EXPENSE	
RENT OR LEASE	
REPAIRS & MAINTENANCE	
SUPPLIES	
TAXES & LICENSES	
TRAVEL	
MEALS & ENTERTAINMENT	
UTILITIES	

OTHER (LIST TYPE & AMOUNT)	