## **BUSINESS PROFIT/LOSS STATEMENT**

NAME				
ADDRESS				
BUSINESS	ID # (SS OR	F.E.I.N.)		
07000 W				
GROSS INC	COME	\$		
ADVERTISI	NG		\$	
CAR & TRU	JCK EXPENS	 ES		
	MILEAGE			
		STARTING ODOMETER		
		ENDING ODOMETER		
		BUSINESS MILEAGE		
	TOLLS/PAF	RKING	\$	
	ACTUAL EX	PENSES		
		CAR/TRUCK INSURANCE	\$	
		REGISTRATION	\$	
		REPAIRS	\$	
COMMISSI	ON & FEES		\$	
CONTRACT	LABOR (INC	CL 1099 MISC FORMS)	\$	
INSURANC	E			
	BUSINESS		\$	
	WORKERS	COMPENSATION	\$	
	S/E HEALT	H INS.	\$	
INTEREST				
	MORTGAGE	<u> </u>	\$	
BUSINESS CREDIT CARD		CREDIT CARD	\$	
LEGAL & PROFESSIONAL FEES		AL FEES	\$	
OFFICE EXI	PENSES			
POSTAGE			\$	
	PHONE (LAND & FAX)		\$	
	SUPPLIES		\$	
	CELL PHON	IES	\$	
PENSION & PROFIT SHARING PLANS		ARING PLANS	\$	
PURCHASE	S	<del>-</del>	<b></b>	
	MERCHANI	DISE	\$	
		BEGINNING INVENTORY	\$	
		ENDING INVENTORY	<u> </u>	
	RETURNS		\$	
RENT OR L	EASE			
	VEHICLES/	MACH./EQUIP	<u> </u>	
	LAND OR B	US. PROPERTY	\$	

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PROVIDED BY YOU AND IN ACCORDANCE WITH THE ENGAGEMENT LETTER.

PLEASE REVIEW THIS INFORMATION CAFEFULLY BEFORE SIGNING TO ENSURE
THAT THERE ARE NO OMISSIONS OR MISSTATEMENTS OF MATERIAL FACTS.