

# BUSINESS INCOME & EXPENSES

NAME OF BUSINESS \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

**INCOME:**

REVENUE/SALES	
DEC 31 CHECKING BALANCE*	
JAN 1 INVENTORY	
DEC 31 INVENTORY	

\* FOR CORPORATIONS AND LLCs

**EXPENSES:**

ADVERTISING	
AUTO EXPENSE OR MILEAGE	
CONTRACT LABOR	
HEALTH INSURANCE	
INSURANCE (NOT HEALTH)	
INTEREST	
PROFESSIONAL SERVICES	
OFFICE EXPENSE	
RENT OR LEASE	
REPAIRS & MAINTENANCE	
SUPPLIES	
TAXES & LICENSES	
TRAVEL	
MEALS	
UTILITIES	
<b>OTHER (LIST TYPE &amp; AMOUNT)</b>	

**ASSET/EQUIPMENT PURCHASED (LARGE PURCHASE):**

TYPE OF ASSET	DATE PURCHASED	PURCHASE PRICE

**ASSET/EQUIPMENT SOLD:**

TYPE OF ASSET	DATE SOLD	SALES PRICE