INTERIM BUSINESS REPORT FOR THE MONTH OF ______________________

(Do not include personal household expenses. Include only business expenses.)

A. **Starting cash position** (cash + bank balance) ............................................................

B. **Profit or Loss for the Month**

**INCOME:**
1. Gross receipts or sales .........................
2. Cost of goods or services:
   (a) Purchases.................................
   (b) Cost of labor ..............................
      (Do not include employee wages)
   (c) Materials and supplies..............
3. Gross profit (subtract line 2 from 1) ..............
4. Other income (specify) ......................
5. Gross income (add lines 3 and 4) ......................

**EXPENSES:**
6. Property rent ...................................
7. Employee wages (excluding debtor) ..............
8. Debtor’s compensation ......................
9. Employee benefits ..........................
10. Equipment lease payments ..........
11. Secured debt payments ..................
12. Supplies (not included in 2(c))........
13. Utilities ........................................
14. Repairs and maintenance ........
15. Advertising................................
16. Professional fees (specify) ....
17. Insurance:
   (a) Liability ..............................
   (b) Property ..............................
   (c) Vehicle ..............................
   (d) Worker’s compensation ..... 
18. Taxes:
   (a) Payroll................................
   (b) Sales................................
   (c) Other (specify)......................
19. Other expenses (specify)..................
20. Total expenses (add lines 6 through 19) ..................

**TOTAL PROFIT OR LOSS** (subtract line 20 from line 5)...............................

C. **Ending cash position** (A ± B = C) ........................................................

I/We declare under penalty of perjury that the foregoing information is true and correct.

Date: ___________  Debtor(s) __________________________ / __________________________