**Business Budget for case no: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Submitted to the Office of Amrane Cohen, Chapter 13 Trustee**

The report must provide the projected income and expenses for the business for the twelve months starting with the month following the filing of the petition. Please identify any payments made by the business on behalf of the debtor or co-debtor such as car payments for vehicles used for business and personal use on the Reconciliation of any expense listed in the business budget and on schedules I & J, which should be attached to this budget .

Report basis: Cash accounting: \_\_\_ Accrual accounting: \_\_\_\_

**Projected annual budget for the 12 months starting on \_\_\_\_\_\_ and ending on \_\_\_\_\_\_\_\_**

Income:

1. Gross receipts or sales ................................................................. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Returns and allowances ............................................................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Net sales (line 1 less line 2) ........................................................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Cost of goods sold (for business with inventory)
   1. Inventory at beginning of period ....... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   2. Purchases .......................................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   3. Cost of manufacturing labor ........... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   4. Materials and supplies ................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   5. Other costs (attach schedule) ..... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   6. Subtotal (Add lines a-e) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   7. Inventory at end of period (projected) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   8. Net cost of goods sold .................................................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Gross income ............................................................................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expenses:

1. Advertising .................................................................................. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Bad debts and write offs ............................................................. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Car and truck expenses ............................................. ....... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Commissions and fees .............................................................. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Employee benefit programs (other than line 17 or 18) .............. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Insurance (other than health) .................................................. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. Health insurance ....................................................................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Interest ..................................................................................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
9. Legal and professional services ................................................ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. Office expenses ....................................................................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(itemize on a separate sheet if more than $1,200)

1. Pension and profit sharing plan not for debtor(s) ................. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Pension and profit sharing plan for debtor(s) ....................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Rent , lease, or mortgage ..................................................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Repairs and maintenance ................................................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Taxes and licenses .................................................................. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Travel, meals & entertainment ............................................. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. Utilities ................................................................................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Wages to people other than debtor(s) ................................. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
9. Other expenses (itemize if more than $1,200) .................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. Total expenses (total of lines 6 to 24)...................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
11. Net income (Line 5 less line 25) ........................... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This report is presented in support of the confirmation of my chapter 13 plan or amended plan if applicable. The Trustee may rely on this report as my best estimate of the income and expenses of my business for the twelve months starting on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Case number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_