

# Profit & Loss Statement

[Name] \_\_\_\_\_

[Time Period]

EIN \_\_\_\_\_

**Revenue**

Gross Sales	0	
Less: Sales Returns and Allowances	0	
<b>Net Sales</b>		0

**Expenses**

Advertising		
Amortization		
Bad Debts		
Bank Charges		
Charitable Contributions		
Commissions		
Contract Labor		
Depreciation		
Dues and Subscriptions		
Employee Benefit Programs		
Insurance		
Interest		
Internet		
Legal and Professional Fees		
Licenses and Fees		
Miscellaneous-		
Food Supplies		
Payroll Taxes		
Postage		
Rent		
Repairs and Maintenance		
Supplies		
Telephone & Internet		
Travel		
Utilities		
Vehicle Expenses		
Wages		
Meals		
Uniforms		
<b>Total Expenses</b>		0
<b>Net Income (Loss)</b>		0

**Miles Driven:** \_\_\_\_\_

By signing below I accept that the information above is a true and accurate representation of my business accounting records.  
I accept full responsibility if the information above deem to be falsified.

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Printed Name** \_\_\_\_\_