

BUSINESS EXPENSE FORM (PROFIT OR LOSS STATEMENT)

Name of Business owner:	
Social Security Number:	
Business Name:	
Business Address:	
Business Start Date:	
Business EIN (Employer ID Number):	
Tax Filing Year:	
Business Income:	

Business Expenses:		
Advertising:	\$	
Car & truck expenses	\$	
Commissions & fees	\$	
Business Insurance (other than health)	\$	
Contract labor expense	\$	
Mortgages	\$	
Legal & professional services	\$	
Office expense	\$	
Machinery, equipment & other business property	\$	
Repairs Supplies	\$	
Taxes & Licenses	\$	
Travel	\$	
Meals & entertainment	\$	
Business Utilities	\$	
Wages	\$	
Miscellaneous	\$	
Other expenses	\$	
Phone	\$	
Business uniform	\$	
Business miles	\$	
Commuting miles	\$	
Total Business Expense:	\$	

Signature: