

**Business Name:**

**Owner Name:**

Total Gross Receipts----- \$

**EXPENSES**

- 1 Purchases/Materials----- \$
- 2 Supplies----- \$
- 3 Advertising----- \$
- 4 Bank Charges----- \$
- 5 Rent----- \$
- 6 Equipment----- \$
- 7 Office Expense----- \$
- 8 Telephone----- \$
- 9 Utilities----- \$
- 10 Legal and Prof Fees----- \$
- 11 Insurance----- \$
- 12 License and Permits----- \$
- 13 Postage and Delivery----- \$
- 14 Parking and Tolls----- \$
- 15 Printing----- \$
- 16 Dues and Subscriptions----- \$
- 17 Tools----- \$
- 18 Meals and Entertainment----- \$
- 19 Uniforms----- \$
- 20 Travel----- \$
- 21 Repairs and Maintenance----- \$
- 22 Subcontractors----- \$
- 23 Payroll----- \$
- 24 Accounting----- \$
- 25 Other Expenses
- \$
- \$
- \$
- \$
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- \$
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- \$
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