

MONTHLY BUSINESS OPERATING STATEMENT

Case No: _____ Debtor(s) Name: _____ Date Prepared: _____

Receipts and Disbursement for Month Ended _____ A

Amount for Month

Gross Receipts:

B	1 Gross Sales	\$	
C	2 Less Cost of Goods Sold	\$	
	3 Gross Profit from Sales (subtract line 2 from line 1)	\$	
	4 Add Other Income	\$	
	5 Gross Income (add lines 3 and 4)	(A) \$	

Business Costs and Expenses: (Do not list Chapter 13 Plan payment)

D	6 Business Real Property Rent/Lease	\$	
E	7 Business Real Property Utilities	\$	
F	8 Salaries/Wages (not included on line 2 above; exclude owner's draw)	\$	
G	9 Employee Benefits	\$	
H	10 Payroll Tax Deposits	\$	
	11 Sales Tax Deposits	\$	
I	12 Other Tax Deposits	\$	
J	13 Auto Expense	\$	
	14 Repairs/Maintenance	\$	
K	15 Insurance on Business (Fire, Theft, Liability, etc.)	\$	
	16 Workman's Compensation Insurance	\$	
	17 Supplies (not included on line 2 above)	\$	
	18 Telephone/Internet	\$	
	19 Advertising/Promotion	\$	
L	20 Travel/Entertainment	\$	
M	21 Professional Fees Paid (Attorney, Accountant, etc.)	\$	
	22 Other Costs/Expense	\$	
	23 Total Business Costs and Expenses for Month	(B) \$	
	24 Net Income (Loss) for Month (A minus B)	\$	

N	Total Funds On Hand/In Bank At End Of Month	\$	
O	Total Inventory On Hand At End Of Month	\$	
P	Total Accounts Receivable (Collectible) At End Of Month	\$	
Q	Total Accounts Payable At End Of Month	\$	

Under penalty of perjury, I(we) declare that the foregoing information is true and correct.

Signatures: _____ Date: _____
 _____ Date: _____