

# Profit or Loss Form

Company Name:

For the period:

to

**Income:**

Gross Sales or Receipts  
Less returns or sales allowances

**Net Sales**

0.00

**Cost of Goods Sold:**

Inventory on January 0, 1900  
Add Inventory or materials purchased  
Add Freight charges

Total Merchandise

0.00

Less Ending Inventory

**Cost of Goods Sold (CGS)**

0.00

**Other Income:**

Add Other Income (interest, fees, etc earned)

**Total Income (Net Sales-CGS + other income)**

0.00

**Expenses:**

Salaries paid to Owners  
Salaries paid to Employees  
Benefits  
Payroll Taxes  
Utilities  
Rent or Mortgage payment  
Insurance  
Advertising  
Telephone  
Office Expenses  
Repairs or Maintenance  
Travel, Meals or Entertainment  
Other Expenses

**Total Expenses**

0.00

**Net Income:**

**Net Income or Loss (Total Income less Total Expenses)**

0.00

I hereby attest by my signature below that the information above is true and accurate and represents the current status of my income and expenses.

\_\_\_\_\_  
Borrower/Business owner

\_\_\_\_\_  
Date