

BUSINESS OWNERS / SELF-EMPLOYED

Legal Name of the Business: _____

Starting Date of Business: _____ Closing Date of Business: _____

Percentage owned by each owner (give names and percentages):

Each asset of the business worth more than \$1,000 and how much it is worth: _____

Each debt owed by the business and how much is owed: _____

Month-by-Month

Gross Income

Expenses

Last Month:	\$ _____	\$ _____
Two Months Ago:	\$ _____	\$ _____
Three Months Ago:	\$ _____	\$ _____
Four Months Ago:	\$ _____	\$ _____
Five Months Ago:	\$ _____	\$ _____
Six Months Ago:	\$ _____	\$ _____

Average Monthly Expenses:

Advertising	\$ _____	Car & Truck Expenses	\$ _____
Commissions & Fees	\$ _____	Contract Labor	\$ _____
Wages	\$ _____	Employee Benefits	\$ _____
Insurance	\$ _____	Interest	\$ _____
Legal/Professional Services	\$ _____	Office Expenses	\$ _____
Rents/Leasing	\$ _____	Repairs/Maintenance	\$ _____
Supplies	\$ _____	Taxes and Licenses	\$ _____
Travel, Meals & Entertain.	\$ _____	Utilities	\$ _____
Other Expenses	\$ _____		