Income and Expense Sheet (P and L Statement)

Name of Company:							=						
Physical Address:							=						
City, State and Zip:							_						
Tax Year:							_						
	Totals	January	February	March	April	May	June	July	August	September	October	November	December
Income Statement													
income statement													
I													
Income A:		<u> </u>											
Income B:													
Income C:													
Total Income													
Expense Statement													
A di cantinin a													
Advertising		1	1						1				
Rent		1	1				1		1				
Travel													
Insurance													
Professional Fees and Licenses													
Supplies													
Repairs													
Auto													
Wages													
Contractor													
Commissions													
Gas & Electric									1				
Phone													
Cable/Internet													
Water									1				
Taxes Meals & Entertainment									+				
Misc.:													
Misc.:									1				
Misc.:													
Misc.:													
Total Expenses	•	•	•	•	•		•		•	•			
1													
Net Income													
Net income													
Documentation used to Construct	Form:												
I verify the information above is a true	and accurate s	summary for m	y income and	expenses for	the stated bu	siness.							
,		,											
Client Signature:							Date:						
Onen Olynature							Date						
I helped the above mentioned taxpaye	er reconstruct th	neir income an	d expenses. a	nd have attac	hed the gues	tions asked t	o meet the IF	RS due diliae	ence standar	ds			
			,,		- 499		•	9					
Preparer Signature:							Date:						