

NAME:

BUSINESS INCOME & EXPENSES

Year

Expenses:	Amount
Accounting	
Advertising	
Answering Service	
Assessments	
Bad Debts from Sales or Services	
Bank Charges	
Car & Truck Expenses (not entered elsewhere)	
Credit Card Fees	
Commissions	
Computer Expense	
Computer Supplies	
Delivery & Freight	
Dues & Subscriptions	
Equipment Supplies	
Gifts	
Home Office Expense- see attached	
Insurance - Business	
Insurance - Auto	
Insurance - Health	
Insurance – W/Comp	
Interest	
Internet Fees	
Janitorial	
Laundry & Cleaning	
Legal & Professional	
Meals & Entertainment	
Miscellaneous	
NJ Annual Report	
Office Expense	
Office Supplies	
Parking & Tolls	
Pension & Profit Sharing Expense	
Porto-Johns & Refuse	
Postage	
Postal Box	
Rent- Vehicles, machinery, & equipment	
Rent- other	
Repairs	
Safe Deposit	
Security	
Supplies	

NAME:

BUSINESS INCOME & EXPENSES

_____ Year

Expenses:	Amount
Table Rentals	
Taxes - Payroll	
Taxes – Sales tax included in gross receipts	
Telephone & Wireless	
Travel	
Wages	
Web-site Expense	
Other Expenses: (please list item & amount)	

NAME:

BUSINESS INCOME & EXPENSES

Year

Income:	Amount
Gross Receipts or Sales (Attach 1099 Forms)	
Returns & Allowances:	()
Other Income:	
Interest	
Cost of Goods Sold:	
Inventory at Beginning of Year	
Purchases	
Materials & Supplies	
Other Costs	
Labor Costs	
Inventory at End of Year	

NAME:

BUSINESS INCOME & EXPENSES

_____ Year

Home Office Expense:	Amount
Total rooms of home (no baths or basements)	
Total rooms used as office	
or	
Total Square feet office	
Total Square feet of Home	
Cable Internet Service	
Cleaning Service	
Electric	
Gas	
Homeowners Insurance	
Lawn Service	
Repairs	
Security Service	
Telephone	
Water	
Other: (please list Item & amount)	
Travel & Auto Expenses:	Amount
Total Business Miles for Year	
Total Miles for Year	
Gasoline Expense	
Insurance Expense	
Lease Payments	
License & Registration	
Loan Interest	
Repairs & Maintenance Expense	
Other: (please list Item & Amount)	

NAME:

BUSINESS INCOME & EXPENSES

_____ Year
