



INCOME-EXPENSE REPORTING FORM

<b>Income</b>	
	<b>Total Gross Receipts</b>

<b>Expenses</b>	<b>Item</b>	<b>Amount</b>
	Bank Service Fees	
	Background Checks	
	Cable	
	Cellphone	
	Cleaning	
	Computer Supplies	
	Dues & Subscriptions	
	Electricity	
	Equipment	
	Insurance- Health	
	Internet	
	Liability Insurance	
	Medical Screening for Employment	
	Mortgage/Rent	
	Permits & License	
	Postage	
	Printing/Stationary	
	Professional Development (Training)	
	Professional Fees (Accounting/Legal)	
	Property Insurance	
	Repairs and Maintenance	
	Subcontractors	
	Supplies	
	Business Telephone	
	Travel: Hotel	
	Travel: Meals	
Travel: Transportation		
Wages and Salaries		
Water		

Business Name: \_\_\_\_\_ Business EIN: \_\_\_\_\_

<b>VEHICLE INFORMATION</b>				
	<b>Vehicle #1</b>	<b>Vehicle #2</b>	<b>Vehicle #3</b>	<b>Vehicle #4</b>
<b>Year, Make and Model</b>				
<b>Vehicle Type</b>				
<b>Date Purchased</b>				
<b>Date Vehicle First used for Business</b>				
<b>Lease Rent Own</b>				
<b>Monthly Lease/Rent</b>				
<b>Vehicle Registration</b>				
<b>Vehicle Taxes</b>				
<b>Vehicle Inspection, Repairs &amp; Maintenance</b>				
<b>Personal Use %</b>				

<b>Home Office Use Expense</b>	
<b>_____ Total Square Foot of Home/Apt</b>	<b>_____ Total Square Foot of Room Used</b>
<b>Item</b>	<b>Amount</b>
<b>Mortgage/Rent</b>	
<b>Mortgage Interest Paid</b>	
<b>Homeowner/Renter's Insurance</b>	
<b>Home Repairs/Maintenance</b>	
<b>Home Telephone</b>	
<b>Home Utilities</b>	
<b>Property Tax</b>	

If we need additional information, we will contact the owner or the Partner Representative via email and phone.