

**Operating Report  
Business Statement of Income/Loss by Month**

**Month 1    Month 2    Month 3    Month 4    Month 5    Month 6**

Enter Month Here →						
Gross Income/Receipts:						
<b>Operating Expenses:</b>						
Rent (if operated outside home)						
Electricity (if operated outside home)						
Gas (if operated outside home)						
Water (if operated outside home)						
Telephone/Cell (if operated outside home)						
Office Maintenance						
Salaries						
Self Employment Taxes						
Insurance						
Professional Fees/Dues						
Advertising						
Raw Materials/Inventory						
Office Supplies						
Office Equipment/Leases						
Fuel						
Sales Taxes						
Vehicle Tax						
Vehicle Maintenance						
Permits/Registration Fees/Inspection						
Other: _____						
Other: _____						
Other: _____						
Other: _____						
Other: _____						
Other: _____						
Other: _____						
Other: _____						
Other: _____						
Other: _____						
<b>Total Expenses:</b>						
<b>Net Profit/Loss:</b>						