MONTHLY PROFIT & LOSS STATEMENT

For Use By Businesses Operating Under Chapter 13

For Period Ending _____ 202___ (Do not include expenses that are listed on Schedule J of your Bankruptcy Schedules)

| INCOME | TOTALS |
|--|------------|
| 1. Gross Receipts or Sales | \$ |
| 2. Cost of Goods Sold | \$ |
| a. Materials & Supplies \$ | |
| b. Labor Costs \$ | |
| (Do not include wages paid to your employees) | |
| c. Other \$ | |
| 3. Gross Profit (subtract line 2 from line 1) | \$ |
| 4. Other Income | \$ |
| Describe | |
| 5. Gross Income (add lines 3 and 4) | \$ |
| EXPENSES (do not list Chapter 13 payment) | |
| 6. Monthly Payment for Business Property or Office Space (Rent or Lease) | \$ |
| Landlord's Name | |
| 7. Employee Wages | \$ |
| 8. Employee Benefits | \$ |
| 9. Equipment Lease Payment | \$ |
| 10. Secured Debt Payment | \$ |
| 11. Supplies (not included in 2a above) | \$ |
| 12. Utilities | \$ |
| 13. Telephone | \$ |
| 14. Repairs & Maintenance | \$ |
| 15. Miscellaneous Office Expenses | \$ |
| Describe | |
| 16. Advertising | \$ |
| 17. Travel & Entertainment | \$ |
| 18. Professional Fees | \$ |
| Professional's Name Purpose | |
| 19. Insurance: | \$ |
| a. Liability \$ | |
| b. Property \$ | |
| c. Vehicle \$ | |
| d. Worker's Comp \$ | |
| e. Other \$ | |
| 20. Taxes: | \$ |
| a. Payroll \$ | ¥ |
| b. Sales $\$$ | |
| c. Other $\$$ | |
| | - ^ |
| 21. Total expenses (add lines 6 through 20) | \$ |
| TOTAL PROFIT (LOSS) (subtract line 21 from line 5) | \$ |

I/We declare under penalty of perjury that the information provided above is true and correct to the best of my/our knowledge, information and belief.

Dated:_____

Signature

Bankruptcy Case No.

Signature