

Cash Basis Profit and Loss Statement

Date Range: _____

Owner: _____

Income

Description	Amount (USD)
Sales / Revenue	_____
Other Income	_____
Total Income	_____

Expenses

Description	Amount (USD)
Advertising & Marketing	_____
Bank Fees	_____
Insurance	_____
Office Expenses	_____
Professional Fees	_____
Rent	_____
Supplies	_____
Utilities	_____
Travel	_____
Total Expenses	_____

Net Profit (Loss): _____

Prepared by: _____ Date: _____