FAUNDARE CAPITAL

# Quarterly Profit & Loss Statement

For _____(Name of Business)

Quarter Ending _____

**Income:**

| | | |
|---|---|---|
| 1 | Your Business Income | |
| 2 | **TOTAL INCOME** | **$** |

**Business Expenses:**

| | | |
|---|---|---|
| 3 | Advertising/Marketing | $ |
| 4 | Credit/Debit Card Fees | $ |
| 5 | Equipment Rental/Lease | $ |
| 6 | Insurance Expense | $ |
| 7 | Licenses/Permits | $ |
| 8 | Office Supplies Expense | $ |
| 9 | Postage & Delivery | $ |
| 10 | Rent - Office/Storage Space, Etc. | $ |
| 11 | Supplies/Materials Expense | $ |
| 12 | Travel/Entertainment | $ |
| 13 | Utilities Expense | $ |
| 14 | Vehicle Expense | $ |

Other Business Expenses:

| | | |
|---|---|---|
| 15 | | $ |
| 16 | | $ |
| 17 | | $ |
| 18 | **TOTAL OPERATING EXPENSES** | **$** |

(Add lines 3 through 17 = line 18)

| | | |
|---|---|---|
| 19 | **PROFIT OR (LOSS) FROM BUSINESS** | **$** |

(Line 2 minus line 18 = line 19)

PREPARED BY: _____

DATE PREPARED: _____