

Profit and Loss Statement

Contractor Name: _____

Period Covered: _____

Date Prepared: _____

Income

Description	Amount (\$)
Client Payments	
Other Income	
Total Income	

Expenses

Description	Amount (\$)
Supplies & Materials	
Travel	
Professional Fees	
Marketing & Advertising	
Utilities & Internet	
Other Expenses	
Total Expenses	

Net Profit / Loss

Net Profit / (Loss) (Total Income - Total Expenses)

Signature

Date