CHASE

SAMPLE PROFIT & LOSS STATEMENT

Loan Number: _____ Percentage of Ownership _____%

Business Owner Name(s): _____

Company Name: _____

Company Address: _____

Type/Nature of Business: _____

Dates Reported (mm/dd/yyyy): from ____/ ____/ _____ to ____/ ____/ _____

(Must be minimum of 3 full months. If seasonal, please provide 12 months profit and loss.)

Please fill in the fields that apply to your business.

GROSS INCOME	
Gross Sales (Total amount of income from sales or service before subtracting expenses)	$
Other Income (Any other additional funds earned through the company such as payments from people leasing space or payments from investors)	$
Total GROSS INCOME BEFORE TAXES	$0

EXPENSES	
Cost of Goods Sold (Direct costs to produce or obtain the goods sold by the company)	$
Accounting and Legal Fees	$
Advertising	$
Insurance (Do not include homeowners insurance)	$
Maintenance and Repairs	$
Supplies	$
Payroll Expenses (Salaries and wages for owner(s) on the mortgage loan)	$
Payroll Expenses (Salaries and wages for employees who are not owner(s) on the mortgage loan)	$
Postage	$

(Next page, please)

Please fill in the fields that apply to your business.

Rent (Do not include rent from subject property)	$
Licenses	$
Taxes (Do not include real estate taxes on the property; do not include income taxes on the business - include the total of any other taxes that you have to pay for the business)	$
Telephone	$
Travel/Transportation	$
Utilities	$
Other (Total and explanation of any other expenses not already listed; do not include depreciation, depletion or amortization)	$
Total EXPENSES	$ 0

NET INCOME	
Net Income Before Taxes	$
Taxes (Paid on business income)	$
Total NET INCOME AFTER TAXES	$ 0

By signing this document, I/we certify the following:

1. That I am self-employed/independent contractor/1099 employee.
2. That all the information is truthful.

I/we understand that knowingly submitting false information may constitute fraud.

Business Owner's Signature_____ Date _____

Business Owner's Signature_____ Date _____