Projected Operating Statement

Beginning Mo./Yr._____ Name of Business_____

	1st Month	2nd Month	3rd Month	4th Month	5th Month	6th Month	7th Month	8th Month	9th Month	10th Month	11th Month	12th Month	Total	Total Year 2
Gross Sales or Receipts														
Less: Cost of Goods Sold														
Gross Profit														
Less Expenses														
Accounting & Legal														
Advertising														
Bad Debts														
Depreciation														
Insurance														
Interest														
Rent														
Repairs & Maintenance														
Salaries & Wages (*to others*)														
Supplies														
Taxes & Licenses														
Other Expenses														
Total Expenses														
Net Profit (*Before Income Taxes and Debt Service*)														
Projected Owner's Withdrawal														
SBA Debt Service														
Net Profit Before Taxes														

This is certified correct to the best of my knowledge this_____ day of_____, _____.

_____
Signature