STATEMENT OF EARNINGS

FOR SELF-EMPLOYED INDIVIDUALS

FULL NAME

BUSINESS NAME (IF APPLICABLE)

TYPE OF BUSINESS / PROFESSION

STATEMENT PERIOD (FROM)

STATEMENT PERIOD (TO)

TAX ID / SOCIAL SECURITY NUMBER

DESCRIPTION OF INCOME / REVENUE	AMOUNT
GROSS RECEIPTS / SALES	
Gross Revenue from Services / Sales	
Other Business Income	
Total Gross Income (A)	
EXPENSES	
Cost of Goods Sold (if applicable)	
Advertising and Marketing	
Car and Truck Expenses	
Office Expenses & Supplies	
Rent or Lease (Vehicles, Machinery, Real Estate)	
Utilities and Phone	
Insurance	
Taxes, Licenses & Permits	
Other Expenses (Specify: _____)	
Total Expenses (B)	

DESCRIPTION OF INCOME / REVENUE	AMOUNT
NET EARNINGS / NET PROFIT (A minus B)	.....

Declaration: I hereby certify that the information provided in this Statement of Earnings is true, accurate, and complete to the best of my knowledge.

SIGNATURE OF SELF-EMPLOYED INDIVIDUAL

DATE