

CASH FLOW MANAGEMENT

Name _____
Business Name _____
Address _____

Case # ____ - _____
Date _____
for Month of _____

Income/Sales/Revenue _____
Less Purchases (Cost of Goods Sold) _____
Net _____
Interest Income _____
Total Revenue (+) _____

EXPENSES

Net Wages _____
Rent _____
Advertising _____
Gas/Oil _____
Freight/Delivery _____
Insurance _____
Accounting _____
Supplies _____
Licenses & Permits _____
Telephone _____
Utilities _____
Office Expenses _____
Repairs/Maintenance _____
County Property Tax _____
City Tax _____
Employment Security _____
Department of L&I _____
Department of Revenue _____
IRS 940 Deposit _____
IRS 941 Deposit _____
Tax Reserve Account _____
Operating Reserve Account _____

Total Expenses (-) _____
Business Profit (LOSS) = _____
Wage Earner Income (+) _____
Total Cash Available for Month (=) _____
Personal Living Expenses (-) _____
Chapter 13 Payment (-) _____
Total Profit & Loss = _____

COURT REQUIREMENTS:

- a) Copy of tax reports filed with taxing agencies (including proof of payment) _____
- b) Month end accounts receivable balance _____
- c) Month end inventory _____
- d) Month end check book balance (attach a copy of bank statement) _____
- e) Tax Reserve Savings Account balance (attach a copy of bank statement) _____
- f) Operating Reserve Account Balance _____