

Profit and Loss Statement

WELLS
FARGO

All borrowers who are self-employed or independent contractors should complete this form if they do not already have their own profit and loss statement.

Company Name: _____

Company Address: _____

Type of Business: _____

Borrower Name(s): _____

Loan Number: _____

Dates Reported on this Form. Please provide year-to-date information starting from the month you opened

the business or from January of this calendar year: _____
(MM/DD/YY – MM/DD/YY)

Please complete the information below that applies to your business

Gross Income	
Gross Sales <i>(Total amount of income from sales or services before subtracting expenses)</i>	\$
Other Income <i>(Any additional funds earned through the company, such as payments received for leasing space)</i>	\$
Total Gross Income Before Taxes	\$

Expenses	
Cost of Goods Sold <i>(Direct costs to produce or obtain goods sold by the company)</i>	\$
Accounting and Legal Fees	\$
Advertising	\$
Business Rent	\$
Business Telephone	\$
Business Travel/Transportation	\$
Business Utilities	\$
Depreciation/Depletion	\$
Insurance	\$
Maintenance and Repairs	\$
Meals and Entertainment	\$
Postage	\$

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Profit and Loss Statement *(continued)*

Expenses <i>(continued)</i>	
Salary/Wage Expenses <i>(for borrowers on the mortgage)</i>	\$
Salary/Wage Expenses <i>(for employees who are not borrowers on the mortgage)</i>	\$
Supplies	\$
Taxes <i>(Do not include real estate taxes on the property or income taxes on the business. Include the total of any other taxes that you have to pay for the business.)</i>	\$
Other Expenses <i>Total and explanation of any other expenses not already listed)</i>	
	\$
	\$
	\$
	\$
	\$
	\$
Total Expenses	\$

Total Net Income <i>(Gross income – expenses)</i>	\$
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Borrower signatures(s)

By signing this document, I/we understand that the information and documents submitted are subject to examination and verification. I/we understand that knowingly submitting false information may be considered misrepresentation and/or fraud and may be referred to the appropriate law enforcement authority for investigation.

Borrower Name

Borrower Name

Signature

Signature

Date

Date

