

MONTHLY FINANCIAL STATEMENT

Month of _____

Debtor(s) _____
dba: _____

Case No. _____

Pursuant to 11 U.S.C. § 1304 (c), you are required to submit to the Trustee, a Monthly Financial Statement each and every month for thirty-six (36) months. Please use this form, making extra copies as needed for future months.

BUSINESS

ACTUAL GROSS INCOME:

Sales: \$ _____

Other: \$ _____

TOTAL ACTUAL GROSS INCOME:

\$ _____

ACTUAL BUSINESS EXPENSES PAID:

Rent \$ _____

Utilities \$ _____

Taxes \$ _____

Insurance \$ _____

Wages
(Employees only) \$ _____

Other (please specify) \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

TOTAL ACTUAL BUSINESS EXPENSES PAID OUT:
(NET INCOME LOSS TO BE CARRIED TO NEXT PAGE)

\$ _____

PERSONAL

INCOME:

Net Income Loss from Business \$ _____

Husband's wage
(Outside Employment) \$ _____

Wife's wage
(Outside Employment) \$ _____

TOTAL MONTHLY INCOME: \$ _____ (a)

ACTUAL PERSONAL EXPENSES PAID OUT:

Rent/Mortgage \$ _____

Utilities \$ _____

Clothing \$ _____

Food \$ _____

Transportation &
Car payment \$ _____

Other
(Please specify) \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

TOTAL ACTUAL PERSONAL EXPENSES PAID OUT: \$ _____ (b)

PERSONAL MONTHLY EXCESS AMOUNT: (line a minus line b) \$ _____

MONTHLY CHAPTER 13 PAYMENT: \$ _____

AMOUNT TO BE CARRIED FORWARD NEXT MONTH: \$ _____

DATED: _____ SIGNED: _____