

Income Statement

Company: _____

For Period of: _____, _____ through _____, _____

INCOME:

Cemetery Spaces/Crypts/Niches	_____
Markers	_____
Open and Close	_____
Other Services and Merchandise	_____
Commissions Received	_____
Perpetual Care Fund Income	_____
Interest and Dividend Income	_____
Other: _____	_____
Other: _____	_____
Other: _____	_____
Other: _____	_____

Total Income: _____

Expenses:

Cost of Goods Sold _____

Operating Expenses:

Advertising	_____
Automobile	_____
Bad Debt	_____
Commission	_____
Computers	_____
Contract Labor	_____
Contributions	_____
Dues and Subscriptions	_____
Depreciation and Amortization	_____
Employee Benefits	_____
Entertainment	_____
Insurance	_____
Interest	_____
Landscaping	_____
Office Supplies	_____

Income Statement (continued)

Oil and Gas	_____	
Outside Services	_____	
Printing and Supplies	_____	
Postage and Freight	_____	
Professional Fees	_____	
Rent	_____	
Sales	_____	
Salaries	_____	
Supplies - Cemetery	_____	
Taxes and Licences	_____	
Telephone	_____	
Travel	_____	
Repairs and Maintenance	_____	
Utilities	_____	
Other: _____	_____	
Other: _____	_____	
Other: _____	_____	
Other: _____	_____	
Other: _____	_____	
Other: _____	_____	
Other: _____	_____	
Total Operating Expenses		_____
TOTAL EXPENSES		_____
NET INCOME (LOSS) FROM OPERATIONS		_____
Extraordinary Items (attach explanation)		_____
Federal Income Taxes		_____
NET INCOME (LOSS) FOR CURRENT YEAR		_____