

## SELF-EMPLOYMENT WORKSHEET

*Please provide 3 months of all self-employment gross monthly income and expenses:*

<b>Applicant Name (First &amp; Last Name)</b>	<b>Date of Birth</b>
<b>Type of Work:</b>	

<b>Month</b>				<b>Annual</b>
Gross Income Total	\$	\$	\$	\$

<b>Deductible Expense:</b>				
Advertising				
Car/Truck Expenses				
Commissions/Fees				
Contract Labor				
Depletion				
Depreciation				
Employee Benefit Programs				
Insurance				
Interest (Mortgage)				
Interest (Other)				
Legal & Professional Services				
Office Expenses				
Pension & Profit-Share Plans				
Rent or Lease (vehicles, machinery, equipment)				
Rent or Lease (other business property)				
Repairs & Maintenance				
Supplies				
Taxes & Licenses				
Travel				
Deductible Meals & Entertainment				
Utilities				
Wages				
Other Expenses				
Expenses for business use of your home				
Costs of Goods Sold				
<b>Expenses Total:</b>	\$	\$	\$	\$

<b>Adjusted Gross Income:</b>	\$	\$	\$	\$
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Client Signature \_\_\_\_\_

Date \_\_\_\_\_