

Busir	ness Name:				EIN:			
Business Address: Date Incorporate				Select Corporation Type: C or S				
City: State: Zip: Type Of Business:								
Phone #: Email:								
#	Description/Expenses	Yearly	#	Description/Expen	ses Yearly			
1	Advertising		31	Rent Expense				
2	Alarm System		32	Repairs Expense				
3	Accounting		33	Salaries and Wages				
4	Auto Expenses		34	Scavenger/ Garbage				
5	Bank Service Charge		35	Security				
6	Computer & Internet Expense		36	Software				
7	Contractors 1099		37	Supplies				
8	Credit Card Fees		38	Tools				
9	Consulting		39	Tax / Payroll				
10	Depreciation		40	Taxes / other				
11	Dues & subcription		41	Sales Taxes				
12	Electricity		42	Telphone Expenses				
13	Entertainment & Meals		43	Tolls / Highway				
14	Equiptment Rental/Leased		44	Travel				
15	Freight		45	Payroll Expenses				
16	Fuel		46	Other Expenses				
17	Gas/ Heat							
18	Insurance Expense			Other Income:				
19	Interest Expense			Bank Total Deposits				
20	Legal & Proffessional			Commissions (1099)s				
21	Landry and Cleaning			Gross Receipts				
22	Marketing & Promotions			Loan Balance 12/31				
23	Maintenance							
24	Miscellaneous			Cost of Sales:				
25	Office Supplies			Beginning Inventory 1/1				
26	Office Compensation			Purchases				
27	Parking							
28	Permits & License			Ending Inventory 12/31				
29	Pest Control							
30	Postage/Delivery			Assets Purchased				
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Under penalty, I state the above information is true & correct. I/We will compile the financial statements and issue an accountant's report thereon in accordance with statement on standards for accounting and review services issued by the American institute of Certified Public Accountants. A compilation is limited to presenting, in the form of financial statements, information that is representation of management. We will not audit or review the financial statements and, accordingly, will not express an opinion or any other form of assurance on them.

Signature:	Name:	Date: