



Self-Employment Income Worksheet: Cash Accounting Method

EAP Household Number
Name
Name of Business
Address of Business
New Business Beginning Month
New Business-Month before signing

I understand that I must complete this worksheet to apply for energy assistance.
 I declare that this information is true and accurate.
 I understand that I may be prosecuted for fraud and perjury under Minnesota statutes if I knowingly provide false information.

Signature: _____ Date: _____

MONTH												
Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total

INCOME												
Gross Receipts/Sales												
Other Gains/Income												
Less Returns/Allowances												
Less Cost of Goods Sold												
Materials/Supplies, etc.												
GROSS INCOME												

EXPENSES												
Advertising												
Car, truck exp/freight/gas/fuel oil												
Commissions/Fees												
Insurance (not incl in fringe)												
Interest												
Legal/Professional												
Office expense												
Rent/lease on land/bldg/equipment												
Repairs and Maintenance												
Taxes and Licenses												
Travel/meals(tax deductible portion)												
Utilities												
Wages/Casual labor/Fringe												
Other* (Must explain below)												
TOTAL EXPENSES												

*Please explain 'Other' expense: _____

NET INCOME												
(Gross Income minus Total Expenses)												