

# SELF-EMPLOYMENT EXPENSE WORKSHEET

Name of self-employed person: \_\_\_\_\_

Name of business: \_\_\_\_\_

Type of business: \_\_\_\_\_

Please check one - This is a ☐ Rental Property ☐ Self-Employed licensed business  
☐ Odd job ☐ Gig/Under the table work

## **Section One: Business Income for the last 30 days from signature date:**

Period covered: The Utility Assistance Program counts income received for the exact 30 days from when you sign your application. Please complete the form based on the dates

From: \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
(Application signature date)

Back to: \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
(30 days prior to signature date)

Gross Income (before deductions): \$ \_\_\_\_\_

Note: Business income MUST be verified with a business bank statement, receipts or ledger.

## **Section Two: Business Deductions:**

For deductions to be counted they must be:

- Itemized
- for the time period stated above
- accompanied by supporting documentation (check one below)

☐ Ledger ☐ Receipts ☐ Bank Statement ☐ None provided- deductions will not be counted.

Source	Amount
RENT (Business and/or equipment)	\$ _____
INSURANCE (Business/ property)	\$ _____
WAGES (Paid to employee(s))	\$ _____
MAINTENANCE REPAIRS (Business car/ property)	\$ _____
SUPPLIES	\$ _____
ADVERTISING/MARKETING	\$ _____
UTILITIES FOR BUSINESS	\$ _____
FUEL	\$ _____
BANK CHARGES/ FEES (Business only)	\$ _____
OTHER _____	\$ _____
<b>TOTAL BUSINESS DEDUCTIONS</b>	<b>\$ _____</b>

\*Note: home expenses such as rent, utilities, etc. are not counted as business deductions.

## **Section Three: Countable Income**

- accompanied by supporting documentation (check one below)

☐ Ledger ☐ Checks/Payment summary ☐ Business Bank Statement

Total Gross Income: \_\_\_\_\_ - Total Deductions: \_\_\_\_\_ = Adjusted Gross Income \$ \_\_\_\_\_

### **Applicant Disclaimer:**

By signing this form, I certify that the information stated is true and accurate. I am under penalty of criminal prosecution if false information results in assistance for which I am not eligible.

\_\_\_\_\_  
Signature of Applicant/Business Owner

\_\_\_\_\_  
Date

## Self-Employment Ledger

Client Name: \_\_\_\_\_

[illegible]