

Pro Forma Worksheet*Based on Calendar Year***2027****2028****2029****2030**

REVENUE				
List each revenue source / category				
....				
....				
....				
....				
....				
....				
....				
Gross Revenue	\$ -	\$ -	\$ -	\$ -

COST OF SALES				
Merchandise				
Food				
Other				
....				
....				
Total Cost of Sales	\$ -	\$ -	\$ -	\$ -
Gross Profit <i>(Gross Revenue minus Total Cost of Sales)</i>	\$ -	\$ -	\$ -	\$ -

OPERATING EXPENSES				
Salaries and Wages				
Insurance - Workers Comp				
Unemployment Taxes				
FICA & Medicare Taxes				
Health Insurance - Employees				
Other Employee/Labor Expenses				
....				
Labor Cost Subtotal	\$ -	\$ -	\$ -	\$ -
Electricity				
Gas				
Water				
Sewer				
Telephone				
Trash Removal				
Internet				
Other Utilities				

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....				
Utilities Cost Subtotal	\$ -	\$ -	\$ -	\$ -
Postage				
Linen				
Uniforms				
Maintenance				
Vehicles				
Equipment				
Advertising				
Electronic Processing Fees				
Accountant Fees				
Contract Services				
Publications and Dues				
Insurance				
Miscellaneous Expenses				
Other Expenses				
....				
Operating Other Costs Subtotal	\$ -	\$ -	\$ -	\$ -
Total Operating Expenses	\$ -	\$ -	\$ -	\$ -

Net Income Before Taxes	\$ -	\$ -	\$ -	\$ -
Taxes on Income				
NET INCOME	\$ -	\$ -	\$ -	\$ -

PROPOSED PAYMENT TO DNR				
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