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| **United States Bankruptcy Court for the Southern District of Alabama****CASE NAME: CASE NO. : MONTH ENDING:** **Operating reports are to be filed monthly with the Bankruptcy Clerk’s Office by the 15th of each month****BUSINESS DEBTOR’S AFFIRMATIONS** |
| **1. YES NO All post petition business taxes have been paid/deposited.****If you answered “No” to the above, list the types of taxes that are now due and owing.****TYPE OF TAX AMOUNT** **$**  **$**  **$**  **$**  |
| **2. YES NO Adequate insurance on all assets/property including fire, theft, liability, collision and casualty and workman’s compensation (if applicable) is currently in full force and effect.****If no, enter: TYPE not in force. TYPE not in force.** |
| **3. YES NO New books and records were opened and are being maintained daily.** |
| **4. YES NO Copies of all banks statements are concurrently filed with the Bankruptcy Clerk’s Office.** |
| **5. YES NO I have otherwise complied with all requirements of the Chapter 11 Operating Order.** |
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| **I CERTIFY THAT THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.**Date RESPONSIBLE PARTYPhone No.  |

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| **United States Bankruptcy Court Southern District of Alabama****CASE NAME: CASE NO. : MONTH ENDING:**  |
| **CASH RECEIPTS & DISBURSEMENTS** | **INCOME STATEMENT****-**Accrual **(Circle One) -**Cash |
| CASH ON HAND (Beginning)is the same figure as cash on Hand (End) of last month.1. CASH ON HAND(Beginning)
2. RECEIPTS:

Accounts Receivable fromForm BA-02(A)-Line II(C) Cash Sales Loan Proceeds from Sale of Property (Not in ordinarycourse of business)Other  1. TOTAL RECEIPTS (Total of B)
2. BUSINESS DISBURSEMENTS

FROM FORM BA-02(B) 1. SURPLUS OR DEFICIT (C minus D)
2. CASH ON HAND (End) (A plus E)
 | 1. REVENUE FROM TOTAL

SALES $ 1. LESS COST OF THOSE

SALES (Cost of materials, Labor, etc.)1. EQUALS GROSS

PROFIT (1 minus 2) 1. LESS OPERATING

EXPENSES 1. EQUALS NET PROFIT OPERATIONS

(3 minus 4) 1. NON-OPERATING INCOME/EXPENSES (LIST SPECIFIC INCOME/EXPENSES)

   1. EQUALS NET PROFIT

OR NET LOSS $ (5 plus or minus 6)**\* *Please itemize Cost of Sales and Expenses on a separate******sheet of paper.*** |
| **I CERTIFY THAT THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF**.DATE RESPONSIBLE PARTY |

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| **United States Bankruptcy Court Southern District of Alabama****CASE NAME: CASE NO. : MONTH ENDING:** **BUSINESS DEBTOR'S ACCOUNTS RECEIVABLE** **(if applicable)** |  |
|  I. **NO ACCOUNTS RECEIVABLE WERE COLLECTED THIS MONTH**. (Check if true)1. **COLLECTION OF ACCOUNTS RECEIVABLE THIS MONTH**.
	1. Amount collected this month on accounts

receivable charged and paid this month. $ * 1. Amount collected this month on accounts receivable charged in prior months

and paid this month. $ * 1. TOTAL collected this month on accounts

receivable. $  1. **PENDING ACCOUNTS RECEIVABLE AS OF THE END OF THE MONTH**:
 |  |
| **ENTITY** | **0-30 Days** | **31-60 DAYS** | **61-90 DAYS** | **OVER 91** | **TOTAL** |  |
|  | $ |  |  |  | $ |  |
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| **TOTALS** | $ |  |  |  | $ |  |
| **I CERTIFY THAT THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.**DATE RESPONSIBLE PARTY |  |

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| **United States Bankruptcy Court - Southern District of Alabama****CASE NAME: CASE NO. : MONTH ENDING:** **BUSINESS DEBTOR'S ACTUAL DISBURSEMENTS** |
| Advertising $ ------------------------------------------Automobiles/Vehicles (repairs & maintenance) $ ------------------------------------------Commissions/Contract Labor $ ------------------------------------------Insurance $ ------------------------------------- ----Inventory Purchased $ ------------------------------------- ----Rent/Lease Payments on Real Estate $ -------------------------------------------Repairs & Maintenance $ -------------------------------------------Salaries & Wages Paid $ -------------------------------------------Secured Loan Payments (specify) $ ------------------------------------------- ---------------------------------- $ ---------------------- ---------------------------------- $ -------------------- ---------------------------------- $ --------------------- Supplies $ -----------------------------------------Travel & Entertainment $ -------------------------------------------Taxes (total of all taxes from page 5) $ -------------------------------------------Unsecured Loan Payments $ -------------------------------------------Utilities $ ------------------------------------------- Professional Fees (specify) $ ------------------------------------------- Accounting $ ------------------------  Attorney Fees $ ------------------------ Other --------------------- $ ------------------------ Adequate Protection Payments $ ------------------------------------------Other Business Disbursements (specify) ---------------------------------------------- $ ---------------------------------------- ---------------------------------------------- $ ---------------------------------------- ---------------------------------------------- $ ---------------------------------------- **Total Business Disbursements** $ ----------------------------------------  |
| **I Certify that the above information is true and correct to the best of my knowledge and belief.****Dated: ------------------- ----------------------------------------------------** **Responsible Party** |

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| **United States Bankruptcy Court Southern District of Alabama****CASE NAME: CASE NO. : MONTH ENDING:** **BUSINESS DEBTOR'S TAX PAYMENTS** |
| **A. WITHHELD TAXES FOR EACH PAYROLL PERIOD** |
| PAYROLL DATE | PAYROLL AMOUNT | **FICA 941** | **STATE** INCOME TAXESPAID | **LOCAL** INCOME TAXESPAID |
| AMOUNT DUE | AMOUNT DEPOSITED |
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| TOTAL |  |  |  |  |  |
| **B. UNEMPLOYMENT TAXES FOR EACH PAYROLL PERIOD** |
| PAYROLL DATE | TAXABLE PAYROLL | **FUTA 940** | **STATE** |
| AMOUNT DUE | AMOUNT DEPOSITED |  |
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| TOTAL |  |  |  |  |
| **C. OTHER TAXES (SPECIFY TYPE: EXCISE, SALES, ETC. INCLUDE TAXES DUE AND PAID QUARTERLY)** |
| **DUE** | **PAID** |
| DATE | TYPE | AMOUNT | DATE | TYPE | AMOUNT |
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| TOTAL |  |  |  |  |  |
| **I CERTIFY THAT THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.****DATE** **RESPONSIBLE PARTY** |

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| **United States Bankruptcy Court - Southern District of Alabama****CASE NAME: CASE NO. : MONTH ENDING:** **BUSINESS DEBTOR'S BANK ACCOUNTS** |
| Bank, Credit Union, Etc. | Account No. (Checking, Savings, CD, Etc.) | Statement Balance | Date | Indicate Pre or Post Petition Account |
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| **GROSS PAYROLL**(Wages, Salaries, Commissions, Bonuses, Etc.) |
| Officer #1 (Name)  | $ |  |
| Officer #2 (Name) Other Officer (Name) Employees (Number) Employees (Relatives) Name Name | $ $ $ $ $ $ |
| **INVENTORY (IF APPLICABLE)** |
| Inventory - Beginning of Month (COST) Inventory - Purchased this Month - CASH Inventory - Purchased this Month - CREDITInventory - End of Month (COST) | $ $ $ $  |
| **PAYMENTS MADE TO PRE-PETITION UNSECURED CREDITORS** |
|  | 1. No payments on pre-petition debts have been made this month.
2. The following payments have been made this month to unsecured

creditors whose debts were incurred prior to the filing of this case: |
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| **CREDITOR** | **AMOUNT & DATE** | **PURPOSE** | **PAYMENT COURT APPROVED?** |
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| **I CERTIFY THAT THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.****DATE** **RESPONSIBLE PARTY** |

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| **United States Bankruptcy Court - Southern District of Alabama****CASE NAME: CASE NO. : MONTH ENDING:** **BUSINESS DEBTOR'S POST-PETITION ACCOUNTS PAYABLE** |
| **CHECK A or B** A. All operating expenses since the beginning of this case have been paid. Therefore there are no post-petition accounts payable.**\*\* OR \*\*** B. Post-petition accounts payable are as follows: |
| **ENTITY OWED** | 0-30 DAYS | 31-60 DAYS | 61-90 DAYS | OVER 91 | TOTAL |
|  |  | $ | $ | $ | $ |
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| **TOTALS** |  | $ | $ | $ | $ |
| **I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF**.Dated**:------------------------------** |  |
| Responsible Party |