SELF-EMPLOYMENT LEDGER

NAME:	
ГҮРЕ OF BUSINESS:	
DATES COVERED:	
GROSS INCOME:	
TOTAL EXPENSES:	FOUNDATION COMMUNITIES FOUNDATION COMMUNITIES FOUNDATION COMMUNITIES
NET INCOME (Business Profit or Loss):	E HEALIN COVERAGE

BUSINESS INCOME (including cash payments)			DEDUCTIBLE BUSINESS EXPENSES		
Date Received	Type of Income	Amount Received	Date Paid	Type of Expense	Amount Paid
Received		Received	raiu		r alu
TOTAL					
TOTAL					

Self-Employment Ledger: page _____ of _____