

MONTHLY FARM FINANCIAL REPORT

FOR THE MONTH OF _____, 200__

NAME OF DEBTOR: _____

CASE NO.: _____

I. CASH RECEIVED DURING THE MONTH BY SOURCE:

MILK _____

CULL COWS AND CALVES _____

CROP SALES _____

GOVERNMENT PAYMENTS _____

RENT INCOME _____

OTHER FARM INCOME _____

“ “ “ _____

“ “ “ _____

“ “ “ _____

TOTAL FARM INCOME: \$ _____

II. FARM OPERATING EXPENSES BY CATEGORY:

LABOR _____

REPAIRS AND MAINTENANCE _____

RENT _____

FEED _____

CROP EXPENSES
(seed, fertilizer, chemicals) _____

MACHINE HIRE _____

SUPPLIES _____

BREEDING _____

VET _____

FUEL AND OIL _____

TAXES _____

INSURANCE _____

UTILITIES _____

FREIGHT AND TRUCKING _____

OTHER MILK CHECK DEDUCTIONS _____

OTHER _____

OTHER _____

TOTAL OPERATING EXPENSES: \$ _____

GROSS PROFIT BEFORE DEBT SERVICE: \$ _____

III. PAYMENTS TO SECURED CREDITORS OUTSIDE PLAN:

CREDITOR: _____

TOTAL NON-PLAN PAYMENTS: \$ _____

NET FUNDS AVAILABLE FROM OPERATION (1): \$ _____

IV. NON-FARM INCOME BY SOURCE:

WAGES _____

INVESTMENT INCOME _____

RENTS _____

SOCIAL SECURITY _____

OTHER _____

OTHER _____

TOTAL NON-FARM INCOME (2): \$ _____

TOTAL FAMILY LIVING EXPENSES: \$ _____
(PLAN PROJECTS: \$ _____ /MONTH)

**TOTAL FUNDS AVAILABLE FOR PAYMENTS
TO CHAPTER 12 PLAN (1+2+3):** \$ _____

V. **ITEMS CHARGED BUT NOT PAID FOR AT MONTH END:**

FEED	_____
CROP NEEDS	_____
VET	_____
REPAIRS	_____
TAXES	_____
OTHER	_____
OTHER	_____

TOTAL A/P AT MONTH END: \$ _____

I certify under penalty of perjury that I have read the foregoing statement, and it is true and correct to the best of my knowledge, information and belief.

Date

Debtor/Officer of Debtor