

# PROFIT LOSS REPORT

Name	Name	Purpose	Purpose
Email	Email	Approved by	Approved by
DriverID	DriverID		
CarlID	CarlID		

## TRIP HOURS

Dates	Hours	How spent
Date	Hours	How spent
Date	Hours	How spent
Date	Hours	How spent
Date	Hours	How spent

## EXPENSES

Category	Dates	Details	Amount
	Date	Description of expense	Amount
	Date	Description of expense	Amount
	Date	Description of expense	Amount
	Date	Description of expense	Amount
	Date		Amount
	Date		Amount

## REVENUE

Category	Dates	Details	Amount
	Date	Description of Revenue	Amount
	Date	Description of Revenue	Amount
	Date	Description of Revenue	Amount
	Date	Description of Revenue	Amount
	Date	Description of Revenue	Amount
	Date		Amount
	Date		Amount
	Date	Subtotal	Amount
	Date	Less amount paid by company	Amount
	Date	Total amount owing to employee	Amount
	Date		Amount

Signature

Date