

MONTHLY FARM FINANCIAL REPORT

FOR THE MONTH OF _____, 20__

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