

**PROFORMA INCOME STATEMENT**  
PRACTICE #HG-934 from P&L

	Jan - Dec 2018	Adjustments	Proforma
Patient Fees	357,917		357,917
<b>Net Receipts</b>	<b>357,917</b>		<b>357,917</b>
<b>Expenses:</b>			
Accounting & Legal	4,795		4,795
Advertising	2,314		2,314
Bank Charges	69		69
Charity <sup>1</sup>	240	(240)	0
Dental Supplies	23,426		23,426
Depreciation <sup>2</sup>	3,935	(3,935)	0
Dues & Subscriptions <sup>3</sup>	4,661	(2,000)	2,661
Employee Benefits	300		300
Insurance			
Malpractice	2,585		2,585
Worker's Comp	2,544		2,544
Laboratory	22,412		22,412
License	662		662
Merchant Service Fees	2,236		2,236
Office	9,257		9,257
Office Meetings	325		325
Outside Services	4,499		4,499
Postage	1,540		1,540
Refund & Returned Checks	4,925		4,925
Rent <sup>4</sup>		15,600	15,600
Salaries & Wages <sup>5</sup>	142,210	(50,000)	92,210
Taxes			
Payroll	12,801		12,801
Property	1,374		1,374
Sales & Use Tax	559		559
Telephone	758		758
Uniform	900		900
Utilities	1,930		1,930
<b>TOTAL EXPENSES</b>	<b>251,257</b>		
<b>TOTAL ADJUSTMENTS</b>		<b>(40,575)</b>	
<b>TOTAL ADJUSTED EXPENSES</b>			<b>210,682</b>
<b>NET PROFIT</b>	<b>106,659</b>		<b>147,234</b>
<b>ADJUSTED NET PROFIT</b>			<b>147,234</b>

NOTES
<p>1.) Charity: Considered of personal benefit to the owner.</p> <p>2.) Depreciation: Considered a non-cash expense.</p> <p>3.) Dues &amp; Subscriptions: Considered of personal benefit to the owner.</p> <p>4.) Rent: Seller owns building. Adjustment reflects annual mortgage payment, based on monthly rent of \$1,300.00.</p> <p>5.) Salaries &amp; Wages: Adjusted to reflect true salaries &amp; wage range for a practice of this size.</p> <p style="text-align: center;"><b>**Above data has not been audited by Western Practice Sales.</b></p> <p style="text-align: center;"><b>It is the Buyer's responsibility to verify if information is true and correct.</b></p>