

**CREATING YOUR
BUSINESS PLAN**

**FAILING TO PLAN
IS
PLANNING TO FAIL**

Type of Business Organization:

Our business is organized as (mark one alternative and fill in data):

_____ a single proprietorship owned by _____

_____ a partnership owned by: _____

and _____ (a copy of the partnership agreement and, if applicable, a copy of the "Doing Business As..." notice are attached);

_____ a corporation that was organized on _____ (date), that has these officers and registered agent:

President: _____

Vice President: _____

Secretary: _____

Treasurer: _____

Registered Agent: _____

Copies of documents marked below are attached:

___ the Articles of Incorporation, Corporate Charter and By-laws,

___ the minutes of the stockholders meeting in which persons named below were authorized to sign contracts and other legal documents on behalf of the _____ corporation:

___ the minutes from a stockholders meeting in which persons named below were authorized to act on behalf of the corporation in borrowing funds in amounts up to \$ _____:

Other pertinent information about the nature of our business unit:

The principal reason a business will purchase our product is: _____

Principal Trade Area:

The geographic units in our trade area are: _____

Our trade area has: _____ Persons _____ Families _____ Businesses

The number of persons is: _____ Increasing _____ Constant _____ Declining

The number of families is: _____ Increasing _____ Constant _____ Declining

The number of businesses is: _____ Increasing _____ Constant _____ Declining

The trade area market is: _____ Growing by _____ percent/year _____ Not changing

_____ Decreasing by _____ percent/year

Nature of the Competition:

The number of our competitors is: _____ None _____ Few _____ Many

Our product difference is: _____

Our competitive advantage is: _____

We have a unique niche because: _____

OUR ANNUAL SALES GOALS

Estimated annual total market within our trade area for products like ours:

_____ units at \$ _____/unit=\$ _____ per year

Our 1st year sales goal: _____ units @ \$ _____/unit = \$ _____

Our 2nd year sales goal: _____ units @ \$ _____/unit = \$ _____

Our 3rd year sales goal: _____ units @ \$ _____/unit = \$ _____

INSURANCE

Our insurance coverage includes: (Mark and complete all that apply.)

_____ Liability insurance coverage of \$ _____ per person and \$ _____ per event that provides coverage for:

_____ Product liability

_____ Premises liability

_____ Malpractice

_____ Vehicle accidents

_____ Errors & omissions

_____ Other (identify): _____

_____ Hazard insurance on property in the amount of \$ _____ under a policy issued _____.

_____ Hazard insurance on inventory in the amount of \$ _____ under a policy issued by _____.

_____ Business continuation (loss of use) insurance up to \$ _____ under a policy issued by _____.

_____ Workman compensation insurance policy issued by: _____

_____ Other insurance (identify): _____

BANKING ARRANGEMENTS

The name and address of the bank in which an account for this business will be maintained is:

This account will contain only business unit funds. All business funds will be deposited in this account, and all expenses will be paid from it.

BUSINESS BALANCE SHEET

ASSETS

LIABILITIES

Current Assets:

Cash _____

Accounts receivable _____

Inventory _____

S-T notes rec'able _____

Prepaid expenses _____

Other _____

Subtotal _____

Current Liabilities:

Accounts payable _____

Short-term notes _____

Curr. pymts. on L-T _____

Interest payable _____

Taxes payable _____

Accrued payroll _____

Other _____

Subtotal _____

Long-term Assets:

Contracts Rec'able _____

Vehicles _____

Other _____

Subtotal _____

Long-term Liabilities:

Real estate debt _____

Debt on vehicles _____

Other _____

Subtotal _____

TOTAL _____

TOTAL _____

Fixed Assets:

Real estate _____

Bldgs. & Equip. _____

Other _____

Subtotal _____

Contigent Liabilities:

Taxes if liquidated _____

Co-signed loans _____

Other _____

Subtotal _____

TOTAL ASSETS: _____

TOTAL LIABILITIES _____

TOTAL ASSETS MINUS TOTAL LIABILITIES = NET WORTH _____

PRO FORMA (PROJECTED) CASH FLOW STATEMENT

(Month or Year) _____

Sales less returns	_____	_____	_____	_____
Cost of goods sold	_____	_____	_____	_____
Materials, labor, etc.	_____	_____	_____	_____
Total costs	_____	_____	_____	_____
GROSS PROFIT MARGIN	_____	_____	_____	_____
<u>Operating Expenses:</u>				
Wages & benefits	_____	_____	_____	_____
Accounting & legal	_____	_____	_____	_____
Advertising	_____	_____	_____	_____
Dues, subscriptions, etc.	_____	_____	_____	_____
Entertainment	_____	_____	_____	_____
Insurance	_____	_____	_____	_____
Repair & maint.	_____	_____	_____	_____
Rent/lease pymts.	_____	_____	_____	_____
Supplies	_____	_____	_____	_____
Telephone	_____	_____	_____	_____
Transportation/auto	_____	_____	_____	_____
Utilities	_____	_____	_____	_____
Interest Expense	_____	_____	_____	_____
Property & sales taxes	_____	_____	_____	_____
Other expenses	_____	_____	_____	_____
_____	_____	_____	_____	_____
TOTAL CASH OPERATING EXP.	_____	_____	_____	_____
Depreciation	_____	_____	_____	_____
Loan principal pymts.	_____	_____	_____	_____
Owners withdrawals	_____	_____	_____	_____
TOTAL OTHER OUTFLOWS	_____	_____	_____	_____
Net flow before taxes	_____	_____	_____	_____
Income & FICA taxes	_____	_____	_____	_____

NET CASH FLOW AFTER TAXES _____

BUSINESS PLAN AND FINANCIAL PROSPECTUS

OF

(name of business)

COMPILED BY:

DATE COMPLETED:

_____, 20____