					CASH FLOW STATEMENT								
Business Name: XXXXXXXXXXXXXX													
For Year: 200X													
	start	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Total
Cash on Hand														
REVENUE														
Parent Payments														
Food Program														
Activity Fees														
Slot Hold Fees														
Field Trip Fees														
Other														
TOTAL REVENUE														
Available Cash														
EXPENSES														
Accounting/ Legal														
Food														

Child Care Supp.														
Furn. And Equip.														
Rent														
Loan Payment														
Insurance														
Off. Supplies														
Telephone														
Marketing														
Utilities														
Vehicle														
License and Fees														
Repair and Maintenance														
Wages														
Owners Draw														
Upgrade														
Other														
TOTAL EXPENSE														
Ending Cash														