

SELF-EMPLOYMENT INCOME REPORT

The information you provide on this form will only be used to see if you meet the income rules for programs such as BadgerCare Plus, FoodShare, or Medicaid for the Elderly, Blind, or Disabled. This form is not the only way you can provide information about your self-employment income. You can provide the information in another way, such as through tax returns or bookkeeping records. If you do not provide your self-employment income, you may not be able to get or keep getting benefits.

See the Self-Employment Income Report Completion Instructions, F-00107A, at <https://www.dhs.wisconsin.gov/library/collection/f-00107> for information on filling out this form.

SECTION 1

Personal Information



Name – Individual (Last, First, MI)

Case Number

SECTION 2

Business Information



Name – Business

Type – Business

Street Address

City

State

Zip Code

Business Start Date

Month/Year of Significant Change (if applicable)

Percent of Business Owned by Individual
0.00%

SECTION 3

Signature and Date



By signing this form, you are saying that the information you provided is correct and complete to the best of your knowledge.



SIGNATURE

Date Signed

SECTION 4

Business Income and Expenses (include income and expenses for the whole business, but do not include personal income and expenses)



Month of operation:	Choose One	Choose One	Choose One
Year of operation:			
Number of hours individual worked for business during month of operation:			
A. Gross Business Income	Amount	Amount	Amount
1. Gross receipts and/or sales for your business			
2. Other business income, specify:			
B. Gross Business Expenses	Amount	Amount	Amount
1. Business wages and commissions paid to your employees			
2. Employee benefit programs, pensions, and profit sharing business expenses			
3. Business travel			
4. Business vehicle expenses			
5. Business rent or lease expenses			
6. Business repairs and maintenance expenses			
7. Business telephone and utilities expenses			
8. Business materials and supplies expenses			
9. Business freight expenses			
10. Business legal and professional fees			
11. Business advertising, dues, and publications expenses			
12. Business taxes (does not include income taxes)			
13. Business insurance expenses			
14. Purchase price of income-producing real estate, capital assets, capital equipment, and durable goods for your business			
15. Principal payment on loans for the purchase of income-producing real estate, capital assets, capital equipment, and durable goods for your business			
16. Business depreciation			
17. Business depletion			
18. Business amortization			
19. Other business expenses, specify:			

B. Gross Business Expenses	Amount	Amount	Amount
20. Other business expenses, specify:			
21. Other business expenses, specify:			

USDA NONDISCRIMINATION STATEMENT

This institution is an equal opportunity provider.

RESET FORM