

| Business Name | | Business Telephone Number | |
|----------------|-------------------------------|----------------------------|----------|
| Address | City | State | ZIP Code |
| Business Owner | HHS Child Care License Number | Date Business Plan Created | |

Complete the following charts to indicate expenses and income for your child care program for the next 12 months.

| | ANNUAL | _ EXPENSES | | |
|--|--------------------------------|--------------------------|--------------------------------|--|
| Specify combined total for all staff in each position listed below-if applicable | | | | |
| | Total Yearly Combined Wages | | Total Yearly Combined Wages | |
| Director's Wages | | Assistant Director Wages | | |
| Head Teacher Wages | | Teacher Wages | | |
| Teacher Aide Wages | | Other Staff Wages | | |
| | | TOTAL WAGES | | |

| Expense | Amount | Expense | Amount |
|------------------------|--------|-------------------|--------|
| License Fees | | Utilities | |
| Insurance | | Mortgage | |
| Rent | | Real Estate Taxes | |
| Legal and Professional | | Food | |
| Advertising | | Training | |
| Cleaning Supplies | | Transportation | |
| Educational Supplies | | Mileage | |
| Repairs\Maintenance | | Interest | |
| Quarterly Taxes | | Loans | |
| Retirement Program | | Other | |

TOTAL EXPENSES

| ANNUAL INCOME | | | |
|----------------|----------|-----------------|----------|
| Fee | Per Year | Fee | Per Year |
| Infant Fees | | Toddler Fees | |
| Preschool Fees | | School Age Fees | |
| Part-Time Fees | | Drop-In Fees | |

TOTAL FEES

| | Amount | | Amount |
|--------------------|--------|--------------|--------|
| Child Care Subsidy | | Grants | |
| USDA Food Program | | Other | |
| | | TOTAL INCOME | |

IUIAL INCOME

TOTAL PROFIT/LOSS

Describe your budget and business finances from the previous page.

Give a detailed overview and vision of your program and services you will offer.

Describe other funding sources you are using to start your child care business.

Describe your target audience/customer and how will you reach them.

Describe your management structure, as well as job titles, job descriptions, and average wages for each staff member.

Describe your business structure. (Limited Liability Company, LLC, Sole Proprietorship, Partnership, Corporation, etc.)

Describe your plans for record-keeping and business policies.

What are your business's long-term goals, 3-5 yrs?

Use additional document if more lines are needed.

| Signature of Program Owner or Director | Date | |
|---|------|--|
| Signature of Start Child Care Coordinator | Date | |