



LOSS OF INCOME/EXTRA EXPENSE WORKSHEET

Account _____

Address _____

Loss of Income

Gross income (calculated as gross sales less discounts & allowances for bad debts, returns, sales tax, prepaid freight):	
Other earnings derived from the operation of the business:	
Total Gross Income from Operations:	
Deduct:	
Cost of merchandise sold & supplies consumed in the operation of the business:	
Cost of services purchased from others:	
Ordinary payroll (payroll that would not continue during the period of suspension of operations):	
Charges allocated to ordinary payroll (FICA, unemployment, etc.):	
Total Deductions:	
Loss of Income Value:	

	x		=	
Loss of Income		Coinsurance		Amount Required

Extra Expense

Rent of temporary premises:	
Maintenance of temporary premises:	
Rent for temporary equipment:	
Moving expenses (including labor):	
Utilities for temporary premises:	
Other (advertising, phone, etc):	
Total Extra Expenses Incurred:	

	+		=	
Loss of Income		Extra Expense		Total Limit

Signature	Date
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