

Expenses

Name: _____

Address: _____

Telephone: (Home): _____ (Bus.): _____

(Cell): _____

List all expenses on a ***monthly*** basis:

Housing (rent, condo or co-op charges) \$ _____

Mortgage \$ _____

Home Equity Line of Credit \$ _____

Real Estate Taxes \$ _____

Water / Sewer \$ _____

Garbage Collection \$ _____

Heating fuel \$ _____

Gas and Electric \$ _____

Telephone \$ _____

Food \$ _____

Clothing \$ _____

Laundry \$ _____

Dry Cleaning \$ _____

Insurance \$ _____

 Accident \$ _____

 Life \$ _____

 Homeowner's \$ _____

 Health \$ _____

 Other (describe) \$ _____

Medical \$ _____

Dental \$ _____

Pharmaceutical \$ _____

Household help:

 Nurse \$ _____

 Maid \$ _____

Home Health Aide	\$ _____
Other (cook, gardener, etc.)	\$ _____
Household maintenance:	
Repairs	\$ _____
Furniture, linens, furnishings	\$ _____
Cleaning supplies	\$ _____
Appliances (including maintenance)	\$ _____
Painting	\$ _____
Gardening	\$ _____
Other	\$ _____
Employment Related:	
Union Dues	\$ _____
Uniform	\$ _____
Automobiles:	
Loan Payments	\$ _____
Gas and oil	\$ _____
Repairs	\$ _____
Insurance	\$ _____
Other	\$ _____
Recreation / Entertainment:	
Vacation	\$ _____
Movies	\$ _____
Theater	\$ _____
Dining Out	\$ _____
Children's birthday parties / Team sport fees / Outings / allowances	\$ _____
Beauty Parlor/Barber	\$ _____
Charitable contributions	\$ _____
Hobbies	\$ _____
Public Transportation	\$ _____
Payment on outstanding loans / creditors / credit cards	\$ _____
Child Care	\$ _____
Education and Tuition (explain)	\$ _____
Pet expenses	\$ _____
Other miscellaneous expenses (i.e. cell phone, cable etc.)	\$ _____
<u>TOTAL MONTHLY EXPENSES</u>	\$ _____