

**MONTHLY LIVING EXPENSE SHEET** of \_\_\_\_\_ (Name)  
 Date : \_\_\_\_\_

<b>Mortgage</b>	\$	
<b>Real estate taxes</b> (if not included in mortgage payment)	\$	
<b>Homeowners insurance</b> (if not included in mortgage payment)	\$	
<b>Utilities electric, water and heat</b>	\$	
<b>Cable television &amp; internet</b>	\$	
<b>Telephone and cell phone</b>	\$	
<b>Automobile Payment</b>		
<b>Auto insurance</b>	\$	
<b>Auto repair or oil changes</b>	\$	
<b>Automobile gasoline</b>	\$	
<b>Auto maintenance</b>	\$	
<b>Auto car tabs, license</b>	\$	
<b>Food</b>		
<b>Personal products and supplies</b>	\$	
<b>Clothing</b>	\$	
<b>Hair cuts / salon/ nails</b>	\$	
<b>Entertainment / recreation/ travel</b>	\$	
<b>Medical and dental insurance premium</b>		
<b>Uncovered medical and dental costs</b>	\$	
<b>Prescription drug costs</b>	\$	
<b>Personal allowances</b>		
<b>Newspapers, magazines</b>	\$	
<b>Credit cards and loans</b>		
<b>1. Card Name _____ (Total balance \$ _____)</b>		
<b>Minimum monthly payment amount -----&gt; =</b>	\$	
<b>2. Other cards or loans</b>	\$	
<b>TOTAL MONTHLY LIVING EXPENSES</b>		
	\$	

If children also, add their expenses for each item in the column next to yours and add columns separately and then together. If you are still living with your spouse and sharing expenses, please fill this sheet in as if you were already divorced and separated and how much it will cost you to live without your spouse paying any of your expenses.