

TOTAL MONTHLY EXPENSES NOT INCLUDING DEDUCTIONS WITHHELD FROM WAGES

Rent _____
First Home Mortgage _____ real estate/property taxes included ____ insurance included ____
Second Home Mortgage _____
Electricity _____
Heat _____
Water & Sewer _____
Telephone _____
Cell phone _____
Cable _____
Home maintenance _____
Food _____
Clothing _____
Laundry/dry cleaning _____
Medical expenses _____
Transportation (not including car payments) _____
Recreation (clubs, entertainment, newspapers..) _____
Charitable contributions _____

INSURANCE NOT DEDUCTED FROM WAGES:

Homeowner's or renter's _____
Life _____
Health _____
Auto _____
Taxes _____ (specify: _____)
Monthly Auto payments _____
Alimony/child support _____
Personal business expenses _____
School supplies/lunches _____
Child care _____

OFFICE USE ONLY

TOTAL EXPENSES: _____ **TOTAL MONTHLY INCOME:** _____