

HOUSEHOLD EXPENSES

1. Rent or 1st Mortgage: \_\_\_\_\_
2. 2<sup>nd</sup> Mortgage : \_\_\_\_\_
3. Line of Credit: \_\_\_\_\_
4. Home Telephone: \_\_\_\_\_
5. Cell Phone(s) : \_\_\_\_\_
6. Cable/Satellite: \_\_\_\_\_
7. Internet: \_\_\_\_\_
8. Water and Sewer: : \_\_\_\_\_
9. Electricity: \_\_\_\_\_
10. Gas /Heat: \_\_\_\_\_
11. Sanitation Pick Up: \_\_\_\_\_
12. Real Estate Taxes (If Not in Mortgage): \_\_\_\_\_
13. Homeowner's Insurance (If Not d in Mortgage): \_\_\_\_\_
14. Renter's Insurance: \_\_\_\_\_
15. Food/Groceries: \_\_\_\_\_
16. Work and School Lunches: \_\_\_\_\_
17. Home Maintenance (Repairs, Snow Removal, Lawn: Care and Other Upkeep) : \_\_\_\_\_
18. Gasoline: \_\_\_\_\_
19. Day Care/Baby Needs: \_\_\_\_\_
20. Pet Expenses: \_\_\_\_\_
21. Charitable Contributions: \_\_\_\_\_
22. Alimony Paid: \_\_\_\_\_
23. Child Support Paid: \_\_\_\_\_
24. Personal/Family Clothing: \_\_\_\_\_
25. Gifts: \_\_\_\_\_
26. Laundry/Dry Cleaning: \_\_\_\_\_
27. Personal Toiletries: \_\_\_\_\_
28. Tobacco/Alcohol: \_\_\_\_\_
29. Personal Grooming: \_\_\_\_\_
30. Medical and Dental Expenses (Not Covered by Insurance) : \_\_\_\_\_
31. Public Transportation & Parking: \_\_\_\_\_

HOUSEHOLD EXPENSES

- 32. Recreation/Entertainment:\_\_\_\_\_
- 33. Fitness Clubs:\_\_\_\_\_
- 34. Newspapers, Magazines, Books:\_\_\_\_\_
- 35. Storage Units:\_\_\_\_\_
- 36. Postage:\_\_\_\_\_
- 37. Office Supplies:\_\_\_\_\_
- 38. Car Loan 1:\_\_\_\_\_
- 39. Car Loan 2:\_\_\_\_\_
- 40. Life Insurance:\_\_\_\_\_
- 41. Health Insurance:\_\_\_\_\_
- 42. Disability Insurance:\_\_\_\_\_
- 43. Delinquent Tax Payments:\_\_\_\_\_
- 44. Student Loan Payments:\_\_\_\_\_
- 45. Automobile Insurance:\_\_\_\_\_
- 46. Automobile Taxes/Tag:\_\_\_\_\_
- 47. Car Repairs:\_\_\_\_\_
- 48. College Tuition:\_\_\_\_\_
- 49. Private Elementary/Secondary School Tuition:\_\_\_\_\_
- 50. Dependant's School/Supplies Expenses:\_\_\_\_\_
- 51. Debtor's Total Credit Card Payments:\_\_\_\_\_
- 52. Spouse's Total Credit Card Payments:\_\_\_\_\_
- 53. Support of Dependents Not Living at Home:\_\_\_\_\_
- 54. Support of Family Member:\_\_\_\_\_
- 55. Phone Cards:\_\_\_\_\_
- 56. Job Related Expenses:\_\_\_\_\_