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| **EXPENSES—COLUMN A** |  |  |
| **HOUSING** |  |  |
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| **UTILITIES** |  |  |
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| **FOOD/ENTERTAINMENT** |  |  |
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| **CLOTHING** |  |  |
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| **EDUCATION** |  |  |
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| **EXPENSES—COLUMN B** |  |  |
| **INSURANCE** |  |  |
| Life |  |  |
| Homeowners/Renters |  |  |
| Health/Dental |  |  |
| Auto |  |  |
| Umbrella |  |  |
| Optical |  |  |
| Disability |  |  |
| Uninsured Medical |  |  |
| Other |  |  |
| **Total** |  |  |
| **NOT REIMBURSED** |  |  |
| Medical |  |  |
| Dental |  |  |
| Optical |  |  |
| Pharmacy |  |  |
| **Total** |  |  |
| **HOUSEHOLD/HELP** |  |  |
| Repairs/Appliances |  |  |
| Painting/Gardening |  |  |
| Snow Plow |  |  |
| Other |  |  |
| **Total** |  |  |
| **AUTOMOBILE** |  |  |
| Car Payments |  |  |
| Gas/Oil |  |  |
| Parking |  |  |
| Maintenance/Repairs |  |  |
| Other |  |  |
| **Total** |  |  |
| **SUPPORT** |  |  |
| Vet/Pet |  |  |
| Child Support prior |  |  |
| Alimony prior |  |  |
| Other |  |  |
| **Total** |  |  |
| **COLUMN B TOTAL** |  |  |

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| **EXPENSES—COLUMN C** |  |  |
| **RECREATIONAL** |  |  |
| Extracurricular |  |  |
| Country Club |  |  |
| Vacation |  |  |
| Sr. HS Expenses |  |  |
| Allowances |  |  |
| Health |  |  |
| Sports |  |  |
| Club/gym |  |  |
| Birthdays |  |  |
| Summer Camp |  |  |
| **Total** |  |  |
| **MISCELLANEOUS** |  |  |
| Hair/Barber |  |  |
| Nail Salon |  |  |
| Massage |  |  |
| Gifts |  |  |
| Charitable Contributions |  |  |
| Union/Org. Dues |  |  |
| **Total** |  |  |
| **TAXES** |  |  |
| Federal Taxes |  |  |
| State Taxes |  |  |
| Village/Town Taxes |  |  |
| SS/Medicare |  |  |
| **Total** |  |  |
| **DEBTS** |  |  |
| Credit Cards |  |  |
| School Loans |  |  |
| 401K-PensionLoans |  |  |
| Other |  |  |
| **Total** |  |  |
| **RETIREMENT** |  |  |
| Other |  |  |
| **Total** |  |  |
| **COLUMN C TOTAL** |  |  |
| + Write Column A TOTALS HERE |  |  |
| + Write Column B TOTALS HERE |  |  |
| **GRAND TOTAL** |  |  |