

WORKSHEET

ESTIMATED MONTHLY INCOME AND EXPENSES

ESTIMATED MONTHLY INCOME:

- | | | |
|--|----------|----------|
| 1. Paychecks (Net/"Take Home") | \$ _____ | |
| 2. Interest/Dividends | _____ | |
| 3. Social Security/Pension | _____ | |
| 4. Alimony/Child Support | _____ | |
| 5. Other | _____ | |
| 6. Total Estimated Monthly Income | | \$ _____ |
| (Add Lines 1 through Line 5 Inclusive) | | |

ESTIMATED MONTHLY EXPENSES:

- | | | |
|---|----------|----------|
| 7. Mortgage(s)/Rent | \$ _____ | |
| 8. Homeowner(s)/Renter's Insurance | _____ | |
| 9. Real Estate Taxes | _____ | |
| 10. Water & Sewer | _____ | |
| 11. House Repairs | _____ | |
| 12. Groceries | _____ | |
| 13. Telephone | _____ | |
| 14. Gas (House) | _____ | |
| 15. Electric | _____ | |
| 16. Credit Cards | _____ | |
| 17. Car Payment(s) | _____ | |
| 18. Car Insurance | _____ | |
| 19. Licenses (Car) | _____ | |
| 20. Gas (Car) | _____ | |
| 21. Car Repairs/Maintenance | _____ | |
| 22. Clothing | _____ | |
| 23. Medical/Dental | _____ | |
| 24. Medical Insurance | _____ | |
| 25. Prescriptions | _____ | |
| 26. Loan Payments | _____ | |
| (Not included in Lines 7 or 17) | | |
| 27. Tuition | _____ | |
| 28. Contributions | _____ | |
| 29. Cellular Telephone | _____ | |
| 30. Pager | _____ | |
| 31. Recreation/Vacation | _____ | |
| 32. Other Insurances (Life, etc.) | _____ | |
| 33. Income Taxes | _____ | |
| 34. Alimony/Child Support | _____ | |
| 35. Transportation | _____ | |
| 36. Miscellaneous | _____ | |
| 37. Other | _____ | |
| 38. Total Estimated Monthly Expenses | | \$ _____ |
| (Add Lines 7 through Line 37 Inclusive) | | |
| 39. *Excess/Deficit | | \$ _____ |
| (Subtract Line 38 from Line 6) | | |

***If Line 38 is greater than Line 6, your estimated monthly expenses exceed your estimated monthly income.**