

# Expenditures (Individuals only)

## Rent or mortgage

Insurance is included

Taxes are included

## Utilities

Electricity & Heat

Water & Sewer

Telephone

Other, specify \_\_\_\_\_

## Home maintenance

## Food

## Clothing

## Laundry & dry cleaning

## Medical & dental expenses

## Transportation (do NOT include car payments)

**Recreation** (clubs, entertainment,  
publications, etc.)

## Charitable contributions

## Insurance

Homeowners or renters

Life

Health

Auto

Other, specify \_\_\_\_\_

## Taxes

## Installment payments (not in plan)

Auto

Other, specify \_\_\_\_\_

Other, specify \_\_\_\_\_

## Alimony, maintenance, support

## Payments for dependents

## Business expenses (ATTACH detailed statement)

Other expenses \_\_\_\_\_