Please bring your most recent end-of-the-month LES to your appointment.

FINANCIAL WORKSHEET

Household Living Expenses and Debt

Monthly Living Expenses	
	Proposed
Groceries, Household Goods	
Meals Out/Lunches	
Meals Out/Suppers	
Mortgage/Rent	
ElectricityBill	
Heat - Oil/Gas	
Water	
Garbage	
Cell phone	
Cable/Satellite/Internet	
Home/Renter's Insurance	
Clothing	
Laundry/Dry Cleaning	
Auto Repairs	
Auto Fuel	
Auto Insurance Premium	
Prescription Medication	
Doctor Copays	
Charitable Contributions	
Books/School Supplies/Tuition	
Organizational dues	
Music Apps	
Streaming (Netflix/Hulu...)	
Entertainment	
Gifts	
Pest Control	
Beauty Shop	
Barber Shop	
Cigarettes	
Beer/Liquor/Wine	
Snack Machine	
Pet Expenses	
Baby Needs	
Child Care	
Baby Sitter Fees	
Child Support	
Children Allowances	
Sport Supplies	
Life Insurance (other than SGLI)	
Other Misc	
Savings/Investments	
Total Expenses	**$0.00**

*Installment Debt Information**		
Creditor	**Monthly Payment**	**Actual Balance**
Totals	$0.00	$0.00

** - includes credit cards, car payments, student loans, personal loans, etc.*

Goal 1

Goal 2

Goal 3