

Name:

Customer Monthly Expense Sheet

List Your MONTHLY Expense for Each Category That Applies To You:		
Rent		
Utilities (average electric & gas)		
Heating Oil/ Propane		
Telephone, Cable TV, Internet		
Cell Phone		
Laundramat & Dry Cleaning		
Food & Groceries (food, paper products, toiletries, cleaning products, alcohol, tobacco)		
Dining Out & Take-out (coffee, restaurant, school lunches, pizza/deli)		
Entertainment (movies, show tickets, sporting events, magazine subscriptions)		
Car payment #1		
Car payment #2		
Auto Fuel		
Car insurance		
Car Maintenance & Repair (estimate annual total and divide by 12)		
Childcare (Day care, Child Support, Children's Allowance)		
Lessons & Tuition (gym memberships, lessons, day camp, school tuition)		
Personal Care (Barber/ Beauty Shop, Manicure)		
Medical/Dental & Prescriptions (co-payments, estimate annual total and divide by 12)		
Pet Care (food, veterinarian, boarding)		
Clothing (estimate annual total and divide by 12)		
Student Loan		
Loan Payment		
Credit Cards # Total Balance		
Gifts (birthdays, Holidays, greeting cards, ch. contributions. Estimate total and divide by 12)		
Payment to Savings		
Other (please explain)		
Other (please explain)		
(#1) Total Regular Monthly Expenses		

Participant - Primary NET Monthly Income		
Co-Participant- Primary NET Monthly Income		
Participant Part-Time or Second Job NET Mo. Income if applicable		
Co-Participant Part-Time or Second Job NET Mo. Income if applicable		
Social Security Monthly Income if applicable		
Monthly Child Support if applicable		
Monthly Other Income if applicable		
(#2) Total Monthly Take-Home		
(#1 minus #2) Surplus/Deficit		