Date Prepared:	Buc	lget	Actual			
	Monthly Expenses	Annual Expenses	Monthly Expenses	Annual Expenses		
Home Expenses	•	•	•	•		
Rent/Mortgage		\$ -		\$ -		
Home Equity Loan/2nd Mortgage		\$ -		\$ -		
Home Equity Line of Credit (HELOC)		\$ -		\$ -		
Homeowners/Association Fee		\$ -		\$ -		
Property Taxes		\$ -		\$ -		
Telephone-Local		\$ -		\$ -		
Telephone-Long Distance		\$ -		\$ -		
Cellphone/pager		\$ -		\$ -		
Internet		\$ -		\$ -		
Security System		\$ -		\$ -		
Cable/Satellite		\$ -		\$ -		
Electricity		\$ -		\$ -		
Gas/Fuel Oil/Propane/Wood		\$ -		\$ -		
Water/Garbage/Sewer/Trash		\$ -		\$ -		
Landscape Maintenance/lawn		Φ.		Φ		
Other - Pool		\$ -		\$ -		
Exterminator		\$ -		\$ -		
		\$ -		\$ -		
Gen'l Home Repairs/Maintenance Home Improvements/Upgrades		\$ -		\$ -		
		Φ.		Φ		
Housecleaning Other - Misc.						
		\$ -		\$ -		
Other		\$ -		\$ -		
Other		\$ -		\$ -		
Other		\$ -		\$ -		
Other		\$ -		\$ -		
Other		\$ -		\$ -		
Other		\$ -		\$ -		
Miscellaneous Household/pool		\$ -		\$ -		
Total Home Expenses	\$ -	\$ -	\$ -	\$ -		
Food						
Groceries		\$ -		\$ -		
Restaurant/Dining Out		\$ -		\$ -		
Wine/Spirits		\$ -		\$ -		
Other		\$ -		\$ -		
Other		\$ -		\$ -		
Other		\$ -		\$ -		
Other		\$ -		\$ -		
Other		\$ -		\$ -		
Delivered Milk		\$ -		\$ -		
Total Food Expenses	\$ -	\$ -	\$ -	\$ -		
Total I dod Expenses	Ψ -	Ψ -	Ψ -	Ψ -		
Entertainment/Recreation						
Entertainment (Excludes Dining Out)		\$ -		\$ -		
Videos/CDs/DVDs		\$ -		\$ -		
Movies and Theater		\$ -		\$ -		
Hobbies		\$ -		\$ -		

Classes/Lessons		\$				\$	_ 1
Vacations/Travel		\$		-		\$	-
Other		\$				\$	-
Other	-	\$		-		\$	
Other	-	\$		-		\$	
Other	-	\$	-	-		\$	-
Other	-	\$		-		\$	-
Memberships/Clubs		\$				\$	
Total Entertainment/Recreation Expenses	\$ -	\$	-	\$	-	\$	_
Total Effectamment/Recreation Expenses	Ψ	_ μ	_	Ψ		Ψ	
Medical (After Insurance-Excludes Children)							
Physicians		\$	-			\$	-
Dental/Orthodontist		\$	-			\$	-
Optometry/Glasses/Contacts		\$	-			\$	-
Prescriptions		\$	-			\$	-
Therapy		\$	-			\$	-
Other		\$	-			\$	-
Other		\$	-			\$	-
Other		\$	-			\$	-
Other		\$	-			\$	-
Other		\$	-			\$	-
Alternative Health Care		\$	-			\$	-
Total Medical Expenses	\$ -	\$	-	\$	-	\$	-
				<u>-</u>			
Insurance							
Life Insurance		\$	-			\$	-
Health (PostDivorce)		\$	-			\$	-
Disabilty		\$	-			\$	-
Long Term Care		\$	-			\$	-
Home Insurance		\$	-			\$	-
Auto Insurance		\$	-			\$	-
Other - Dental ins.		\$	-			\$	-
Other		\$	-			\$	-
Other		\$	-			\$	-
Other		\$	-			\$	-
Other		\$	-			\$	-
Other Insurance (Boat, Umbrella,)		\$	-			\$	-
Total Insurance Expenses	\$ -	\$	-	\$	-	\$	-
Transporation							
Auto Payment		 \$	-			\$	-
Fuel		\$				\$	
Repair/Maintenance		\$	_			\$	_
Other		\$				\$	_
Other		\$	_			\$	
Other - tags		\$	-			\$	-
Other - tags Other		\$	-	-		\$	-
Other		\$	-			\$	- -
License		\$	-			\$	-
LIGHTISC							
Total Transportation Expenses	\$ -	\$	_	\$		\$	

Name:

Phone:

Clothing Expenses

CDC Certified Divorce Coach

\$

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\$

\$

Name:

Phone:

Other

Other Other

CDC Certified Divorce Coach

\$

\$

\$

\$

Name:

Phone:

CDC Certified Divorce Coach

Total Monthly Expenses