

MONTHLY EXPENSE WORKSHEET

Please do not convert monthly expenses to weekly. Simply input the amount of your expense, as paid, and we will convert it accordingly. If certain expenses are paid on a weekly basis rather than monthly, please input the weekly figure and write WEEKLY next to your entry

Total

A. Mortgage/ Rent:

(address)

(1) Principal	\$	_____
(2) Interest	\$	_____
(3) Real Estate Taxes	\$	_____
(4) Homeowners Insurance	\$	_____
(5) Special Assessments/ Fees	\$	_____
		\$ _____

B. Mortgage (Second Home):

(address)

(1) Principal	\$	_____
(2) Interest	\$	_____
(3) Real Estate Taxes	\$	_____
(4) Homeowners Insurance	\$	_____
(5) Special Assessments/ Fees	\$	_____
		\$ _____

Use reverse side of page for additional properties

C. Utilities / Home Heating

(If paid for more than 1 property, please break down costs per property)

(1) Electricity	\$	_____
(2) Natural Gas	\$	_____
(3) Propane Gas	\$	_____
(4) Oil	\$	_____
(5) Water/ Sewer	\$	_____
(6) Telephone (landline only)	\$	_____
(7) Cable/ Internet	\$	_____
		\$ _____

D. Cell Phone

(specify individual or family plan)

\$ _____

E. Allowance for major household repairs/ maintenance \$ _____
(interior and exterior)

F. Allowance for repair/ replacement of household furnishings and/or appliances \$ _____

G. Major housecleaning \$ _____
(including for curtains, carpets, etc.)

H. Domestic Help
(1) Housecleaner \$ _____
(2) Handyman \$ _____
(3) Child Care/ Nanny \$ _____
(4) Employer Taxes (SS/ Workmen's Comp) (Paid by you for persons you employ) \$ _____

I. Home Maintenance
(1) Landscaping \$ _____
(2) Supplies \$ _____
(3) Equipment \$ _____
(4) Tree & Shrub Care \$ _____
(5) Snow Removal \$ _____
(6) Trash Removal \$ _____
(7) Septic System \$ _____
(8) Sprinkler System \$ _____
(9) Furnace/ Chimney \$ _____
(9) Pool \$ _____
(10) Alarm/ Home Monitor \$ _____
\$ _____

J. Household Supplies
(1) Groceries \$ _____
(2) House/ Cleaning Supplies \$ _____
(3) Laundry Supplies \$ _____
(4) Incidentals/ Toiletries \$ _____
(5) Pets \$ _____
\$ _____

K. Home Office / Professional Costs
(If self-employed, do not include business expenses)
(1) Computer/ supplies \$ _____
(2) Postage \$ _____
(3) Accountant/ Tax Prep \$ _____
(4) Books \$ _____
(5) Newspapers/ Periodicals \$ _____
(6) Online subscriptions \$ _____
(7) Continuing Education \$ _____

(8) Licenses / Permits \$ _____
 (9) Union Dues \$ _____
 (Do not include if deducted from pay) \$ _____

L. Personal Maintenance
 (For self and children)

(1) Hair
 (a) self \$ _____
 (b) children \$ _____
 (2) Manicure, Pedicure \$ _____
 (3) Spa/ Massage \$ _____
 (4) Health Club/ Fitness Classes \$ _____
 (indicate whether individual or family)
 (5) Personal Trainer \$ _____
 (6) Cosmetic Treatments \$ _____
 (7) Cosmetic Products \$ _____
 (8) Dry Cleaning \$ _____
 (9) Cobbler, Tailor \$ _____
 \$ _____

M. Clothing

(1) Self \$ _____
 (2) Child, Age: _____ \$ _____
 (3) Child, Age: _____ \$ _____
 (4) Child, Age: _____ \$ _____
 \$ _____

N. Insurance

(paid out of pocket; do not include if deducted from pay)
 (1) Medical \$ _____
 (2) Dental \$ _____
 (3) Vision \$ _____
 (4) Life \$ _____
 (5) STD \$ _____
 (6) LTD \$ _____
 (7) Pet Insurance \$ _____
 \$ _____

N. Uninsured Medical Expenses
 (For self and children)

(1) Co-pays
 (a) General Practitioner \$ _____
 (b) Psychiatrist/ Therapist \$ _____
 (c) Gynecologist \$ _____
 (d) Specialist \$ _____
 (e) Ophthalmologist \$ _____
 (f) Dentist \$ _____
 (g) Orthodontist \$ _____
 (h) Chiropractor \$ _____
 (2) Prescriptions \$ _____

(3) Over the Counter Meds	\$ _____	
(4) Medical Supplies/ Equipment	\$ _____	
(5) Eyeglasses/ Contacts	\$ _____	
(6) Related Travel	\$ _____	
(7) Other: _____	\$ _____	
	\$ _____	\$ _____

O. Children

(Include children's costs that are current and ongoing at this time)

(1) Education

(a) Tuition	\$ _____	
(b) Room and Board	\$ _____	
(c) Transportation	\$ _____	
(d) Books	\$ _____	
(e) Lab Fees	\$ _____	
(f) Activity / Sports Fees	\$ _____	
(g) Insurance	\$ _____	
(h) Supplies	\$ _____	
(i) Computer/ Ipad	\$ _____	
(j) Lunch/ Meal Plan	\$ _____	
(k) Other: _____	\$ _____	
	\$ _____	\$ _____

(2) College Prep

(a) SAT/ACT Class	\$ _____	
(b) College Visits (include lodging, travel, etc.)	\$ _____	
(c) Application Fees	\$ _____	\$ _____

(3) Sports

(a) Equipment	\$ _____	
(b) Uniforms, gear	\$ _____	
(c) Fees	\$ _____	
(d) Travel	\$ _____	\$ _____

(4) Lessons

(a) Classes	\$ _____
(b) Costumes, shoes, gear	\$ _____
(c) Instruments	\$ _____
(d) Other: _____	\$ _____
	\$ _____

(5) Clubs (Cub Scout, Girl Scout, etc.) \$ _____

(6) Tutoring, Coaching \$ _____

(7) School Trips, Events \$ _____

(8) Driver's Education \$ _____

(9) Allowance

(a) Child, Age: _____ \$ _____
(b) Child, Age: _____ \$ _____
(c) Child, Age: _____ \$ _____
\$ _____

(10) Contributions to Child(ren)'s Education Accounts/ Savings \$ _____

(11) Camp

(a) Child, Age: _____ \$ _____
(b) Child, Age: _____ \$ _____
(c) Child, Age: _____ \$ _____
\$ _____

(12) Childcare

(If other than nanny reported above)

(a) Child, Age: _____ \$ _____
(b) Child, Age: _____ \$ _____
(c) Child, Age: _____ \$ _____
\$ _____

P. Entertainment & Recreation

(For self and children)

(1) Dining Out \$ _____
(2) Theater/ Movies/ Concerts \$ _____
(3) Sports \$ _____
(including equipment, equipment maintenance,
club memberships, related travel)
(4) Outings \$ _____
(5) Country Club \$ _____
(6) Video Game Systems/games \$ _____
(7) Subscriptions \$ _____
(Netflix, Amazon Prime, Apple Music, etc.) \$ _____

Q. Vacations

(1) Winter \$ _____
(2) Spring \$ _____
(3) Summer \$ _____
(4) Fall \$ _____
\$ _____

R. Gifts

(1) Birthdays \$ _____
(2) Weddings \$ _____

(3) Anniversaries	\$ _____	
(4) Christmas / Hanukah	\$ _____	
(5) Baby Showers	\$ _____	
		\$ _____

S. Automobile/ Transportation

(If paid for more than 1 auto, please break down costs per auto)

(1) Loan payment	\$ _____	
(2) Lease payment	\$ _____	
(3) Auto Insurance	\$ _____	
(4) Excise Tax	\$ _____	
(5) Registration	\$ _____	
(6) Inspection	\$ _____	
(7) License renewal	\$ _____	
(8) AAA	\$ _____	
(9) Amortization	\$ _____	
(10) Fuel	\$ _____	
(11) Oil Change	\$ _____	
(12) Repairs	\$ _____	
(13) Car Wash	\$ _____	
(14) Parking	\$ _____	
(15) Train / Commuter costs	\$ _____	
		\$ _____

T. Charitable Contributions \$ _____

U. Gambling/ lottery \$ _____

V. Allowance for Savings \$ _____
 (do not include if deducted from pay)

W. Contributions to Retirement \$ _____
 (do not include if deducted from pay)