

Income and Expense Worksheet

MONTHLY INCOME	
Monthly Combined Household Income*:	
Other Income (alimony, child support, etc.):	
<i>Income Total:</i>	

**Monthly Combined Household Income includes applicant, co-applicant, spouse, partner, or any other contributor to the overall household income, regardless of the names listed on the enrolled accounts.*

Please include all expenses as accurately as possible. The provided information will be used to calculate a budget for your household and will assist us in the negotiations process with your creditors. This must be completed with all other documents upon enrollment.

COST OF LIVING			
HOME		RECREATION	
Mortgage/Rent		Gym fees	
Utilities (Electric, Gas, Water)		Team dues	
Cable/Satellite TV		Toys/child gear	
Home telephone		Magazine subscriptions	
Cellular telephone		CDs, DVDs, books, etc.	
Home repairs		PERSONAL	
Home owner's/renter's insurance		Clothing	
DAILY LIVING		Gifts	
Groceries		Salon/Barber	
Dining out		FINANCIAL OBLIGATIONS	
Child care		Retirement (401k, IRA)	
Dry cleaning		Student Loans	
Housecleaning service		Current credit card pmts.	
TRANSPORTATION		Income Tax (IRS)	
Auto loans/lease		OTHER	
Gas/fuel			
Insurance			
Repairs			
Car wash/detailing			
Parking		Total Expenses:	
Public transportation		Funds Remaining:	
HEALTH			
Medical and life insurance		<i>Applicant Signature</i>	
Prescriptions/medications			
Co-payments/out-of-pocket		<i>Co-Applicant Signature</i>	
Veterinary care		<i>Date:</i> _____	