

APPENDIX 1: Monthly Income/Expenses

	Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sept.	Oct.	Nov.	Dec.	Total
EXPENSES*													
Taxes													
Federal													
State													
FICA (Social Security)													
Property Taxes													
Estimated Tax Payments													
Insurance													
Life Insurance													
Disability Insurance													
Long Term Care Insurance													
Health/Dental Insurance													
Homeowner's/Rental Insurance													
Auto Insurance													
Other													
Other													

*Any payments made annually, please break down to monthly

APPENDIX 1: Monthly Income/Expenses

	Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Lab/X-ray													
Entertainment/Recreation													
Education													
Bank Fees													
Charity, Gifts													
Clothing													
Vacation													
Home Maintenance/Furnishings													
Utilities													
Gas/Electric													
Water													
Garbage													
Internet													
Telephone													
Newspaper													
Alarm System													
Other													

APPENDIX 1: Monthly Income/Expenses

	Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Student Loans													
Subscriptions													
Travel													
Car Rent													
Lodging													
Parking													
Misc.													
Airfare													
Utilities													
Other Expenses													
Other Expenses													
Other Expenses													
Other Expenses													
Other Expenses													
Other Expenses													
Other Expenses													
TOTAL MONTHLY EXPENSES													