

| MONTHLY EXPENSE WORKSHEET    |         |         |                             |                |                |
|------------------------------|---------|---------|-----------------------------|----------------|----------------|
| CATEGORY                     | MONTHLY | REVISED | CATEGORY                    | MONTHLY        | REVISED        |
| <b><u>SAVINGS</u></b>        |         |         | <b><u>CLOTHING</u></b>      |                |                |
| <b><u>HOUSING</u></b>        |         |         | Clothing/Shoes/Boots        |                |                |
| Rent/Mortgage/Lot Rent       |         |         | Laundry                     |                |                |
| 2nd Mortgage                 |         |         | Dry Cleaning                |                |                |
| Property Taxes/escrow?       |         |         | <b><u>EDUCATION</u></b>     |                |                |
| Heating                      |         |         | School Supplies             |                |                |
| Electricity                  |         |         | Tuition/Lessons             |                |                |
| Phone/Cell/Pager             |         |         | Books/Papers/Magazines      |                |                |
| Water/Sewer/Trash            |         |         | School pictures/yearbook    |                |                |
| Home Maintenance             |         |         | <b><u>DONATIONS</u></b>     |                |                |
| Furnishing/Appliances        |         |         | Church Tithes/Dues          |                |                |
| Lawn Care/Snow               |         |         | All Other                   |                |                |
| Cleaning Supplies            |         |         | <b><u>PERSONAL</u></b>      |                |                |
| <b><u>GROCERIES</u></b>      |         |         | Professional Hair Care      |                |                |
| Food                         |         |         | Personal Care Items         |                |                |
| Paper Products               |         |         | Petty Cash: Adult           |                |                |
| Lunch/Snack(work/school)     |         |         | Allowances: Children        |                |                |
| Pet Food                     |         |         | Cigarettes/Tobacco          |                |                |
| Bulk Food Reserve            |         |         | Alcoholic Beverages         |                |                |
| <b><u>TRANSPORTATION</u></b> |         |         | <b><u>ENTERTAINMENT</u></b> |                |                |
| Gas/Oil/Bus Fare             |         |         | Vacations/Weekend Trips     |                |                |
| Repairs/Maintenance          |         |         | Videos/eat out/movies       |                |                |
| Car Wash/Parking             |         |         | Cable TV                    |                |                |
| Licenses/Registration        |         |         | Babysitter                  |                |                |
| Car Lease/Payment            |         |         | Health/Social Clubs         |                |                |
| <b><u>INSURANCE</u></b>      |         |         | Gambling - Lottery/Casino   |                |                |
| Health                       |         |         | Internet Access             |                |                |
| Vehicle                      |         |         | <b><u>MISCELLANEOUS</u></b> |                |                |
| Homeowner/Renter's           |         |         | Check/Money Orders          |                |                |
| Life/Disability              |         |         | Union/Professional Dues     |                |                |
| <b><u>CHILD CARE</u></b>     |         |         | Veterinary Care             |                |                |
| Child Support                |         |         | Hobbies                     |                |                |
| Child care/Daycare           |         |         | Postage                     |                |                |
| Diapers/Wipes                |         |         | Tax Preparation             |                |                |
| <b><u>MEDICAL</u></b>        |         |         | <b><u>GIFTS</u></b>         |                |                |
| Doctor                       |         |         | Major Holidays              |                |                |
| Dentist/Braces               |         |         | Other Gifts                 |                |                |
| Prescriptions                |         |         |                             |                |                |
| Glasses/Eye Exams            |         |         | Subtotal Column 2           | \$0            | \$0            |
| Chiropractic                 |         |         | <b>COUNSELOR USE:</b>       | <b>Current</b> | <b>Revised</b> |
| Counseling                   |         |         | Net Monthly Income:         |                |                |
| Subtotal Column 1            | \$0     | \$0     | Monthly Expenses:           | \$0            | \$0            |
| Name:                        |         |         | Subtotal: inc. - exp.       | \$0            | \$0            |
| Date:                        |         |         | Monthly Debt Payment:       |                |                |
|                              |         |         | <b>SURPLUS/DEFECIT:</b>     | \$0            | \$0            |