

Section 6 - Current Expenses

Do you and your spouse live separately and maintain separate households? No Yes. If yes, please let your attorneys know and they will have to provide you with an additional copy of this section to detail the expenses for the completely separate household.

If you are married and reside with your spouse, indicate how much you AND your spouse spend on average every month for the following household expenses. Even if your spouse is not filing with you, indicate how much you AND your spouse spend on the household expenses each month.

Indicate how much you pay for each item each month:

1. Rent or Home Mortgage:\$ _____
 Second Mortgage or Home Equity Loan?\$ _____
 Does that amount include real estate taxes: No Yes
 Does that amount include property insurance: No Yes
2. Utilities:
 - a. Electricity and heating fuel:\$ _____
 - b. Water and sewer:\$ _____
 - c. Telephone, cable and/or internet:\$ _____
 - d. Do you have any other utility bills? If **yes**, describe and enter monthly amount below:

	\$	
Cell phone?	\$	
	\$	
3. Home maintenance (including repairs and upkeep expenses):\$ _____
4. Food: (Including groceries, lunches, etc...)\$ _____
5. Clothing:\$ _____
6. Laundry and dry cleaning:\$ _____
7. Medical and dental expenses:\$ _____
8. Transportation (NOT including auto loan payments):\$ _____
9. Recreation and entertainment:\$ _____
10. Charitable contributions:\$ _____
11. Insurance **NOT** deducted from wages or included in home mortgage payments:
 - a. Homeowner's or renter's insurance:\$ _____
 - b. Life insurance:\$ _____
 - c. Health insurance:\$ _____
 - d. Auto insurance:\$ _____
 - e. Other insurance (*describe and list monthly amount*):
12. Tax bills **NOT** deducted from wages or included in home mortgage payments:
13. Installment payments for car, furniture, etc. (*Describe*):

	\$:	
--	-----	--
14. Alimony, maintenance and support you pay to others:\$ _____
15. Payments for support of additional dependents **not** living at your home:\$ _____

16. Regular expenses from operation of business, profession or farm: \$ _____
Any Other Expense (including non-filing spouse expenses) not listed on this \$ _____
